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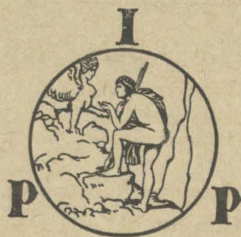
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# THE INTERNATIONAL JOURNAL OF PSYCHO-ANALYSIS

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## REACTION TO PERSONAL NAMES

by

C. P. OBERNDORF, New York.

In a previous communication<sup>1</sup> I cited several examples which demonstrated how unpleasant emotional reaction to personal names may result from an unconscious feeling on the part of the individual bearing that name that it in some way revealed an inherent weakness in personality which the individual wished to conceal. It was also pointed out that such persons through the alteration of their names secured an unconscious outlet for the desire to rectify these deficiencies which they had in some way come to identify with their names.

This view is the reverse of theories commonly advanced that the name is really an influential factor which operates as a considerable stimulus or detriment to the accomplishments of its bearer. Such a general conception is exemplified by the following quotation from Walsh's "Handbook of Literary Curiosities" — "The names that have become famous are those which have a sonorous and stately ring. — One can understand how an obscure Corsican with such a name as Napoleon Bonaparte might have conquered the world. Herbert Lythe becomes famous as Maurice Barrymore — and John Rowlandson would never have become a great explorer unless he had first changed his name to Henry M. Stanley."

In order to test the validity of this theory, I asked my humble

<sup>1</sup> *Psychoanalytic Review*, Vol. V. No. 1, p. 47.



boot-black, who usually responds to the name of Joe, for his real name and I discovered it to be sufficiently resounding, namely, Salvatore Botta. So, too, Edwin Booth, bearing a simple name, achieved a fame histrionically quite equal to that of Henry Irving who changed his name from that of John H. Brodribb. Few persons would contend Booth's brother, John Wilkes Booth, who assassinated President Lincoln was in any way influenced by his name to his infamous act.

Probably Captain John Smith of Virginia and plain Henry Hudson will live in the annals of history quite as long as Henry M. Stanley. Moreover, Stanley's own name, Rowlandson, is not without recognition in the world of art.

Even the psycho-analytical investigators have, it seems to me, quite overestimated the importance which the name may lend in the selection of a profession, when they call attention to such coincidences as a lawyer being named Sharp or an ice-man, Frost, and intimate that the choice resulted from the name.<sup>1</sup> Certainly innumerable examples to the contrary also exist. Doctors by the name of Ill, Sour, etc. come to mind, and the fact that we occasionally encounter a Dr. Sweet or Dr. Cutter cannot be considered very convincing proof of the relationship of profession and name. Some more potent reason than that of a name must exist, which influences a man called Ford to become an automobile manufacturer instead of a bridge builder. Reference to the classified telephone directory reveals a very moderate coincidence of any connection between name and profession.

I appreciate that in many cases the mental mechanism instigating a change of names is actually simpler than in the examples I shall present. In some instances the change may invoke favorable comment.<sup>2</sup> At times the object is very evident to the ordinary observer and is interpreted by him as an attempt to conceal a personal infirmity reflected by the name. Thus, it was noticed that when Germany and German names became unpopular in the United States during the world war, the opportunity of em-

<sup>1</sup> H. Silberer, *Mensch und Name*, *Zentralblatt für Psychoanalyse*, Jahrg. III. S. 460.

<sup>2</sup> The following extract from *Les Lettres* (Paris, April 1, 1920) illustrates this view:

Sir Charles Walston ou le Wilsonien optimiste.

Sir Charles Walston est un enfant de la guerre. Il est né, en 1918, de Sir Charles Waldstein, par une opération spirituelle, identique à la transmutation



bracing this excuse to change the name was utilised almost exclusively by Jews, and not exclusively by those with names of German origin. Moreover, they showed scant inclination to adopt other names than those of Puritanic origin. Very few selected new names of Russian, Italian, French or Hebraic origin. Surely the latter would have precluded any identification with the German quite as conclusively as those which it was fashionable to assume.

However, even in the adoption of new names, where the unconscious motive is not identical with the conscious, those chosen are apt to reflect a compromise reaction, so that very rarely does the new name differ completely from the former one, in other words John Smith would very rarely become Tom Brown, but possibly James Smithers or something similar.

While it would be futile to conjecture what the underlying forces in each case were which impelled the well-known persons previously mentioned to choose pseudo-names, the following examples may throw some light on the mechanisms in general.

In the course of the analysis of patients the following instances of clinging to the maiden name after marriage, and of the adoption of a fanciful name have come to my notice and all seem to substantiate the point of view which I expressed in my previous paper.

### I.

A patient, aged thirty, under analysis for a compulsion neurosis, whose name before marriage was Irma B. Frank married a distant cousin by the name of Frank. Instead of changing her name as is customary under such circumstances to Irma F. Frank, she continued to call herself Irma B. Frank, because, according to her explanation, she possessed a very pretty silver-mounted monogram belt-buckle on which it would have been very inconvenient to change the initials. Besides she saw no reason why she should "burden herself with the name Frank twice."

des Saxe-Cobourg et Gotha en Windsor du britannisme le plus pur. Ces affirmations symboliques de nationalités, cette prise plus rigoureuse de conscience collective, cette élection volontariste d'un idéal qui s'exteriorise par de nouveaux sons patronymiques, n'a rien que de très légitime et de naturel. Aussi bien, l'origine allemande de Sir Charles Walston était-elle déjà filtrée, si je puis hasarder cette image saugrenue, par une implantation solide en terre américaine.



An investigation of the mental life of Mrs. Frank disclosed that she had never quite succeeded in attaining her conceptions of frank dealing. As a matter of fact, especially in the sexual field and in her animosity to her parents, her thoughts were far from the ethical standard which she felt it incumbent upon herself to maintain. In spite of her regard for the truth, Irma could never be quite as open or honorable as she desired to be.

At times when puns were made, such as the name Irma B. Frank inevitably invites, e. g. "Irma, B. Frank in thought and action" she felt both uncomfortable and complimented.

Furthermore, there is an ambivalence to her name which was early discovered. Her initials, I.B.F., if transposed spelt F.I.B. (Fib). So, after all, the name reflected the contradictory elements in her personality.

The "F.I.B." which lay well concealed in the name (as in the personality) afforded a certain unconscious satisfaction in actually revealing the truth if the outsider were clever enough to detect it (which was very unlikely). On the other hand the supportive qualities associated with the appellation "Irma B. Frank" acted as a constant prop and also as a warning, not to deviate from frank action. Thus an unconscious desire for reassurance in her struggle to live according to her ideals of sincerity and to overcome her feeling of inherent deceit, found expression in her maiden name, and unconsciously induced her to cling to it, quite in contradistinction to her usual tendency to conform strictly to established conventions. Being constantly reminded through her name, Irma B. Frank, she thereby received a certain compensatory solace for her repeated failures in personal probity. Of course, the obvious play on words in this instance attains a determining importance only because of its unconscious personal valuation to the patient.

## II.

One day a patient whose name I had entered in my card index as Nellie Hochstein (this is an equivalent name) had occasion to write to me and I was surprised to find that she signed herself Nelye Hochstein. When I took occasion to inquire why she had adopted such an unusual spelling for her given name, she replied that she had originally done so as a girlish



prank and had retained the custom. The palpable attempt to disguise the perfectly good name of Nellie, while the Hochstein, which because of its German origin did not stand in great esteem with the American public about that time (during the great war), remained intact, caused me to investigate.

The patient was born in Wisconsin of a family which had attained a considerable local esteem and social position. In fact during her youth, her father had been one of the prominent and wealthy men of the community. Later unfortunate business reverses caused a loss of his fortune but at a great personal financial sacrifice he had retained his good name.

The patient had dwelt repeatedly on the nobleness of her father's action at the time of his financial misfortune and though her emotions toward him were violently ambivalent, her love took the form of reverence and pride in him. Her personal regard for him and his position caused her to be proud of being a Hochstein notwithstanding the fact that here in New York the name of Hochstein carried with it no semblance of prestige.

This regard for her last name made the fantastic spelling of her first name all the more striking. It is not an uncommon occurrence for the spelling of common names, such as Mamie and Catherine, to be altered to Mayme or Katheryne and in most cases it is probably done with the idea of lending distinction to persons of those names who feel that they lack it. The patient in question, Nelye, had been, since the age of four or five, a constant and frequent masturbator. In the household, the tyrannical though righteous father, had ruled with uncompromising severity and had allowed his daughters little social freedom, especially with men. Sex had been regarded in the home as something ordinary and vulgar, and my patient, through her indulgence in masturbation, identified herself with such a class of people. Nellie, to her, signified a name borne by ordinary persons and those who are sexually free<sup>1</sup>, such as, "Nellie, the Beautiful Cloak Model". The patient could not tolerate being associated even in name

<sup>1</sup> As an example of the desire to have the name harmonize with the characteristics of its bearer, the following from the *New York World* is illustrative. Here, however, the parents are taking the unwonted precaution of deferring in their choice for the sake of accuracy: —

SHE IS 'TSA HERR'.

A baby girl was born to Mr. and Mrs. Dougal Herr of Caldwell, N. J.,



with anything which connoted to her mind the ordinary (the sexual). She thought that even through the association by name, what she considered to be her depravity might be revealed to the minds of others. Hence, she became Nelye. It was not surprising that suddenly during the course of the analysis she reverted to plain Nellie Hochstein, inasmuch as with the acquisition of tolerance for sex the necessity for the mask disappeared.

### III.

A French artist who had achieved considerable fame under the name which he now bears, informed me during the course of an analysis for a compulsion neurosis that he had changed his surname, which was originally Thomas, because of the ridicule to which that name exposed him. He had retained his original given Christian name. Inasmuch as Thomas, as surname, is not without lustre (compare Rowlandson—Stanley) even in his own field and in his own country, *e. g.* Ambrose Thomas the composer, this reaction seemed to be incongruous. In order to interpret this aversion to Thomas it is necessary to trace briefly the patient's previous history.

He was born in one of the large French cities where his father conducted a small jewelry store. He describes his father as an indolent and autocratic, though incompetent man, who continually made excuses for his own short-comings and procrastinations. The patient, who was intimately attached to his mother, began, while still a boy, to resent the abusive attitude of his father toward his mother during their frequent domestic wrangles.

After years of discord with his father, the patient left home at nineteen years, following a violent quarrel. His virulent antagonism to his father persisted up to the time of the latter's death many years later, and, in my opinion, may have formed an auxiliary motive for not wishing to bear his father's name, but not the primary one. As is usual, in such cases, a more potent

three weeks ago. The parents were unable to decide on a name so they concluded to wait several years and name the child according to her traits and temperament. In filing the birth certificate with the Town Clerk they gave the name of the child temporarily, as *Itsa Herr* (It's a Herr). Mr. Herr is a Hoboken attorney. His wife is the daughter of Supreme Court Justice Garrison.



personal reason appears to have been the determining factor. It seems to me that this interpretation is supported by the fact that the patient did not change his name immediately on severing connections with his father's household but five years later.

Quite aside from the patient's antagonism to his father, he developed a feeling of inferiority determined in part by the fact that he had certain girlish traits. At least he thought that he exhibited them. Moreover, in primary school through comparing his genitals with those of the other boys, he recognised that his penis differed in shape from their's. This defect was later recognised as a phimosis. Because of the pain caused by his phimosis he was extremely slow and at times actually unsuccessful in obtaining an ejaculation when he masturbated. He lived in hopes, however, that the physical deformity would in some vague way be rectified with increasing years and at about the age of eighteen, he formed the conclusion that intercourse would cure his phimosis. However, his frequent attempts at intercourse (for unconscious reasons, namely, fear of the father and intolerable maternal incest fancies<sup>1</sup> were unsatisfactory and he reverted to masturbation. Later he indulged in both active and passive homosexual masturbation with boys at the military academy to which he had been assigned as instructor during his service in the French Army. About this time of his life he changed his name from Thomas.

In the French slang, Thoma is equivalent of our word "pot" or chamber. Already during his college days some of the students had called him "Thoma" with some derision. While this had annoyed him, when he entered the army his name became unendurable to him, for his comrades would jocularly greet him with the chant:

"Vide, Thoma(s), vide latus  
Vide pedes, vide manus  
Alleluia, alleluia."

The old Latin biblical chant is literally translated, "See, O Thomas, see his flanks, see his feet, see his hands, hallelulia, hallelulia".

However, in French *vide* is the imperative of the verb meaning

<sup>1</sup> Patient once remarked: "I often dream of my mother and she is the woman beside me that my wife ought to be. This woman has the characteristics of my mother but it is in the rôle of my wife".



to empty. Thus, Vide Thomas signifies "you must empty Thomas". (Thoma) *i. e.*, the chamber.

While the rest of the phrase had little significance, apparently, the idea of *emptying* of the *chamber* (Thomas) seemed to be sufficient to annoy the patient intolerably.

However, the secret of the annoyance could not rest entirely in the connotation of Thomas with chamber. The patient readily acquiesced to the fact when I pointed out to him that the English names equivalent of the French slang Thoma (chamber) such as Chamberlain or Chambers or even Potts are respected and give their bearers no cause for shame. The real reason of the aversion seemed to be more closely associated with the "Vide" than the "Thoma". This was corroborated by a curious slip of the pen which the patient made.

Inasmuch as I was not familiar with the Latin chant, I requested that my patient write it which he did as follows:

Vide Thomas, vide latus  
Vide pedes, vide manu  
Alleluia, alleluia.

Now *manu* is the ablative in the declension of *manus*, meaning by hand. When I pointed out to the patient that he had written the ablative singular, *manu*, instead of the accusative plural, *manus*, he concurred that it could surely not be through ignorance as his Latin had always been exceptionally good but, that it must have been a slip of the pen.

In other words, the disagreeable implication in the taunt rests in "you must empty Thomas" (himself) reflected by "Vide manu" (you must empty by hand) which brought to his mind the mortifying habit of masturbation.

He had constantly feared during his student days that his masturbation might be discovered. At the military academy he lived in dread that the cadets might reveal his practices with them to his superior officers. Thus, the whole idea of emptying by hand had become extremely repugnant. The association of the Thoma was secondary but it was far easier to rectify the secondary association than the fundamental habit. Curiously enough the new name he selected when he changed his name is best translated by the English word "Alter".



## THE REVERSAL OF THE LIBIDO-SIGN<sup>1</sup> IN DELUSIONS OF PERSECUTION

by

AUG. STÄRCKE, Den Dolder, Holland.

It is well known that in delusions of persecution the figure of the loved one reappears as the "persecutor". As a rule it is more or less disguised: for instance, instead of the beloved father there emerges the persecuting superior. Freud has called this phenomenon the return of the repressed libido, and more especially its return with a reversal of the sign; that is to say that what was repressed in the shape of love returns as hatred. This hatred is projected, and represents the content of the delusion.

The essential condition that must be fulfilled before such a reversal of sign can take place is naturally to be found in some attitude of ambivalency. But the question of its particular determinants remains to be discussed.

According to my observations, the content of the delusion is frequently anal persecution.<sup>2</sup> Patients often complain of all sorts of other tortures, of radiations, etc., or simply of being teased or injured by some particular person. But even in these cases, if their confidence can be won, they may unexpectedly confess, with every sign of their surrendering some important secret, that, apart from all this, the essence of the matter consists in an inconceivable piece of villainy, which cannot even be spoken of, and can only be indicated by hints and gestures. Here are one or two instances:

An elderly female patient (a clinical mixed type, with features of manic-depressive insanity and hypochondriacal and nihilistic delusions of persecution) complained among other things that they had "turned her the wrong way round". On being asked the

<sup>1</sup> [Sign (*Vorzeichen*) is used in the mathematical sense of a plus or minus prefix. Transl.]

<sup>2</sup> My colleague, Dr. van Ophuijsen, informs me that he has independently pointed out the connection between persecution and anal-erotism.



meaning of this expression, she replied, apparently in an absent-minded way and without reference to the question: "They have taken me through the little door; people go through the big door, though. People stay with their own husbands and at the big door. People don't go through the little door with neck-twisters". (What do you mean by the little door?) "The back door". Here she hit herself on the buttocks. "No real husband does this with his wife". "People don't let themselves be turned the wrong way".

The second case is that of a male patient who collected corks with great assiduity. He had already been through several attacks of mania and one phase of melancholia, but in the meantime had developed clearly systematized ideas of persecution; these were as a rule dissimulated, but occasionally broke out during his emotional attacks. One day, after shutting the door and looking round to see that no one was there, he explained in a whisper that the purpose of the corks was to protect him "against it"; there were some very strange persons; people didn't want him to have anything to do with women; so that in case of necessity he could shut up the opening with the corks, so that people shouldn't un-awares . . . . . — he completed the words with an unambiguous gesture.

In very many cases patients complain that people want to turn them into "homosexuals" or want to commit "sodomy" with them. By this they do not mean the choice of an object of the same sex, but paederastia.

This core of the delusion which is kept so secret is as a rule concerned with anal acts of lust and violence. After having spoken openly about it the patients often feel relieved, but unfortunately they also often effect a transference of the delusion, as a result of which the physician appears as the persecutor, or is even honoured with an unremitting attachment.

The circumstances which accompany the appearance of this transference (or, clinically speaking, this extension of the delusional system to the recent environment) make it extremely probable that an unconscious *identification of the loved object with the skybalum (faeces)* was present in the first instance, and that this identification provides the more precise basis for the special ambivalency of the paranoic constitution.

The *skybalum* is the primary (real) persecutor; it commits anal acts of violence which are often at the same time acts of pleasure.



It is responsible for one of the most primitive attitudes of ambivalency, for in regard to it pain and pleasure often make their appearance in very rapid succession. This primary ambivalency is subsequently strengthened (secondary ambivalency) by the people in charge of the child in connection with the process of cleaning; since punishment for dirtiness or praise for orderliness in evacuation results automatically in hatred or love as the case may be.

According to the fundamental laws of memory, the attitude of the libido, positive and negative by turns, holds good for the *images* of the whole situation, that is to say, to the relevant part of the child's body (or more accurately to its excrement) as well as to the person who is actively looking after the child.

The ambivalency of feeling directed towards the latter is bound to exercise an important influence on the later development of object love, and it will no doubt determine further conditions for the production of the delusion. The study of the subject is, however, rendered difficult, owing to the circumstance that for this purpose it is absolutely necessary to take into account the "normal" delusional phenomena or systematic constructions (science, religion, etc.), which are psychologically closely related to delusions or identical with them.

The later effects in memory of the events connected with defaecation in earliest childhood result in a predisposition to a subsequent identification with the *skybalum* of (1) the child's own body and (2) the person in charge of it. The character of those components of narcissism which are derived from anal-erotism will be positive or negative according as the child receives more praise or more blame in this connection. Negative narcissism finds its pathological application in delusions of inferiority, which often show a trace of anal-erotism.

According to Freud's biological formula, delusions of grandeur are the regression of sublimated homosexuality to narcissism. The above considerations may lead to an additional requirement, namely, that this narcissism should have an anal-erotic origin. They are strengthened by particular experience, which shows that delusions of persecution are as often accompanied by delusions of inferiority as by delusions of grandeur, and even by extraordinary mixtures of the two. This would be explicable by the inherent ambivalency of anal-erotic narcissism.



Freud's formula might then be amplified in this way: Part at least of the sublimated homosexuality regresses to anal-erotism. In so far as the latter is positive it is used for reconstruction in the shape of delusions of grandeur, and in so far as it is negative it is diverted by being projected as a delusion of persecution.

The second phase appearing by itself would be responsible for building up a suspicious character.

In all this I take no account of any fundamental distinction between melancholic, schizophrenic, and paranoic delusions of persecution. Conditions are frequently met with which can as easily be classified in one group as in another. Since Freud has enabled us to study the elementary syndrome analytically, we no longer have any excuse for the game of pouring cases out of one diagnostical pot into another. There is only this to be said of the systematic division of the psychoses: all actual cases are highly variegated mixtures of every sort of syndrome in every sort of relation. The recognized clinical types or "diseases" only represent a series of typical combinations.



## ON THE ORIGIN OF THE FEELING OF PERSECUTION<sup>1</sup>

by

J. H. W. VAN OPHUIJSEN, The Hague.

In the course of his practice the psycho-analyst is brought into constant touch with the problem of delusions of persecution. Either he has occasion to examine a paranoic patient or his mental products, or he is obliged to recognize that the pathological phenomena which he observes in his neurotic patients are more or less completely analogous to paranoic symptoms. Indeed, psycho-analytical literature already includes a considerable number of contributions to the solution of this problem, Freud's papers being the most important among them. In these the person of the persecutor, the origin of the delusion, and the nature of the persecution, have been the subject of enquiry; nor has there been any lack of allusions to the question which I wish to discuss here, namely the origin of the feeling of being persecuted.

This feeling is a symptom which, in a mitigated form, is never absent from a case of psychoneurosis, but which must of course be distinguished from the delusion of being persecuted. With this feeling I include the neurotic's ideas of reference, his common fear of being attacked from behind, his not being able to bear anyone walking behind him in the street or on the stairs, his dreams of persecution, etc. All these symptoms have in common the uncanny feeling of which the paranoic also complains, or to which he reacts in some other way.

Experience has brought me to the view that this feeling can be traced back to the anal complex, and has led me to expect that psychiatrists will be able to confirm this theory of its origin in the case of their patients. I give below some accounts of cases which may serve as specimens of my observations on this point.

<sup>1</sup> Lecture delivered at a meeting of the Dutch Psycho-Analytical Society on March 30th., 1919, and before the Congress of Medicine and Natural Philosophy at Leyden on April 26th., 1919.



A young man who was suffering from attacks of morbid anxiety, which were chiefly of a hypochondriacal character, one day told me the following dream: He was waiting for the steam tram near the corner of a street which he knew quite well. Although it was very late at night, the tram was to take him to a neighbouring health resort. While he was waiting there, he suddenly became aware that some object had been thrown at him — he did not know from where — and had hit him in the back. He looked round, but could not catch sight of any one. He then went round the corner, and found himself face to face with two men. They were dressed like athletes, and approached him menacingly with sticks in their hands. One of them put his arm round him, and he begged for mercy.

When he woke up it occurred to him that the affect which accompanied the dream had been noticeably less disagreeable than might have been expected from its content; he was only very much annoyed at his unmanly behaviour. He had behaved almost like a girl who was being sexually assaulted. The half affectionate way in which the arm was put round him made him think of a homosexual assault, and he accordingly interpreted the sticks as a male genital. In addition to this, it turned out that he thought that what had been thrown at him must have been something dirty — dung, perhaps —, so that no possible doubt remained as to the form of the assault.

I must also explain that the question of what people said about him was of great importance to the patient. This peculiarity provided the occasion for the dream. The evening before, he had been annoyed at his behaviour at a large gathering in exactly the same way as he was after the dream. People might have said disparaging things about him "behind his back" — ("might have thrown mud [dung] at him").

A second patient declared of himself that people were nothing to him: he was quite different from ordinary people, and did not have to bother about them. In consequence of this he was relatively lonely, and yet his sense of his own importance was not quite enough to help him over his loneliness. One day he had the following dream:

He was standing on some rising ground, which gave him a clear view all round him. While he stood there, a number of dogs came at him and pressed up against him and caressed him with signs



of friendliness. When this began to inconvenience him he drew a revolver and shot some of the animals down. In this way he relieved himself from the situation.

I will proceed at once to the heart of the matter, and quote from his associations to the effect that the dogs reminded him of wolves, and that his father, who died when he was still a small boy, used to tell him a great many enthralling stories about wolves. He called wolves father-animals, just as he used to call snakes mother-animals. The conduct of the animals in the dream reminded him of the behaviour of a number of people, both men and women, whom he had snubbed off from his acquaintance. The phrase in the dream "to press up against him" called up the associations "press of people" [crowd] and "pressure". He now mentioned that on the day before the dream, or on the day before that, he had had to collect his stool for the purpose of a blood-examination. This association showed exactly what sort of "press" was meant in the dream; and this was confirmed by the next part of the dream, in which he relieved himself from his oppressive situation by shooting some of the animals down. It was evidently a question of an evacuation of the bowels, and this would fit in with the occasion of the dream. The occasion of the dream may also sufficiently explain why the "persecutors" were visible in this case. The ambivalency of the "persecutor" is clearer, too, than in the first dream. The most important point, however, is that *"persecutor" and skybalum are simply treated as equivalent things*. I pass over a large number of important details in the dream, but I must mention in this connection that the functioning of his bowels was a subject of the greatest interest to the patient in his early youth, and to his parents as well. I have already hinted in the case of the first patient that he was very much occupied with his physical health, and it is naturally not surprising that his motions played a specially important part in this preoccupation.

In the second dream the figure of the father came to light through the dreamer's association. Although it is not strictly relevant, I cannot omit to mention that a reference to the father inevitably came up in the analysis of the first dream too. The first patient's father was also dead; a Dutch expression for dying is "going round the corner" (het hoekje omgaan). Moreover the patient was a convinced spiritualist, but had not recently ventured to attend a *séance* because he was afraid it might do him harm.



The first example has suggested to us that the persecution may be an assault from behind (directed at the anus) on the part of persons (fathers) with (homo)sexual intentions, who are at first invisible because they are localized behind the back. The second example points to the possibility that the feeling of being assaulted (persecuted) may be a displacement outwards of the feeling of being disturbed by the sensations called up by the *skybalum*. *In that case the persecutor would be the personification of the skybalum.*

A third example ought to make the matter still more clear. This time the patient really had grounds for being concerned as to what people were saying about him; but apart from this he exhibited something not unlike delusions of reference. From his youth upwards he had suffered from every sort of morbid anxiety and had very often had anxiety dreams. One day he described some hypnagogic visions, of which only the third is of interest to us. In these visions he appeared to himself to be a boy. It seemed at first as though he heard his parents going into their bedroom, and saw the light of the candle shining into his room through the crack of the door. (This appearance of the light played a part in his fear of burglars). Then it seemed as though he went into a room, no doubt his parents' bedroom, or as though he was standing on the threshold, and saw something that had to do with blood. Finally, he was looking into a dark place, out of which all sorts of terrible shapes appeared.

This dark place seemed to him at first to be a cupboard; and he saw coming out at him all the hideous forms which had so often persecuted him in his dreams and which had always changed with the circumstances of his life. I need not name them all, and I will only mention that at this point it again occurred to the patient — for the recollection had appeared before — that when he was a child he had seen his father's genitals as his father was getting out of bed. He had been very much frightened at the sight, and overcome with terror had asked his mother what the thing could be.

The dark cupboard turned into a W. C., and the W. C. into the opening of the wastepipe. Then followed the series of anxiety ideas connected with this subject (such as the fear of falling in, etc.) which are so familiar to every analyst. But in the same sitting the patient went a step further and explained that *his morbidly anxious*



*interest in the W. C. was a further development of his interest in his own waste-tube and in what might come out of it.* I do not know whether he ever made use of a looking-glass to gratify this interest. Even without any such intermediate step it is easy to assume that a projection of his rectal and anal sensations took place. The most remarkable feature of the projection was the emergence of anxiety.

I have no doubt that these facts have found many other observers. And if these observations turn out to be correct, it will be the task of the psychiatrist<sup>1</sup> to discover whether the anal persecution is not also the primary fact in the case of those who suffer from delusions of persecution.

<sup>1</sup> Meanwhile Dr. Stärcke (Den Dolder, Holland) has confirmed my suspicion, and has informed me that he expressed this view some years ago at a meeting of Dutch analysts. (Cf. the article bearing upon the subject in the present number of this Journal).



## A CASE OF WAR SHOCK RESULTING FROM SEX-INVERSION

by

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I propose to quote from the notes of a case — not so much from the point of view of discussing the actual conditions present, as of a means of putting before you some of the main points in the technique of Psycho-Analysis, which I consider to be fairly well illustrated therein.

The patient is a young man of twenty-six years of age, of more than average intelligence, and distinctly showing a well-marked degree of the "Artistic Temperament". He complains of a terror of "Something" lurking in the dark, especially in his bedroom, from which he has been compelled, at times, to rush out in a state bordering upon panic. He has never been able to sleep without a light on for more than two years. Subsidiary symptoms are forgetfulness and inability to concentrate.

In treating the case, I resolved to begin with an analysis—the patient proving to be unsuitable for approach by hypnosis. In the preliminary discussion, the patient connected the occurrence of the symptoms, somewhat vaguely, with the following war experience:—

During the Somme Battle, while near Delville Wood, he remembered noticing the unburied head of a soldier which he had frequently to pass. In doing so, he always avoided looking at the face which—to quote his own words—"Bore an expression of extreme horror and disgust", and thereby greatly impressed him. One night, however, despite his usual precautions not to approach the head too closely, he felt his foot tread upon it, and was instantly filled with a great revulsion of feeling, as he felt what he imagined to be the brains "Squelching" around his foot.

At the outset, the case would appear to present the ordinary features of "War Shock". In a very short while, however, it be-



came evident to me that the symptoms sprang from a previous experience, and were founded upon a truly "Freudian" basis.

In commencing the analysis, the word-association test was applied. The patient was instructed to give without criticism, the first word or thought which came to his mind in response to a given word. The "Reaction-time" was noted with a stop-watch, the average working out at 5 to 7 seconds, exceptions being noted to be as long as 30 seconds, or more.

Here, I should like to point out the necessity on the part of the analyst of allowing no preconceived idea as to the condition present in the patient to bias him, and, also, of being cautious in giving hard and fast interpretations or specific meanings to any symbols which may be brought to light during the process of analysis. If the analyst will always bear in mind the fact that it is the *patient's* duty to provide the material, and the analyst's duty to examine that material in the light of the patient's associations, these pitfalls will be avoided.

It is, obviously, useless to attempt to work in any meaning other than that present in the patient's associations. Let the patient be so guided and led by the analyst that he provides the interpretations, and let the analyst always be very much alive to his own "Repressions" and "Complexes" (Upon this latter necessity depends the whole reason why those who intend to use this method should themselves be analysed).

But, with the best intentions, this danger is often with difficulty avoided. Frequently, one is tempted to shorten the work by jumping to conclusions. This is well instanced in the following details of part of the word-association test. The point will be more easily understood, I think, if I tabulate as follows: —

STIMULUS	TIME	RESPONSE	ANALYST'S INFERENCE
Dear	15	Love letters.	He treasures some love-letters
To kiss	7	The dreamt-of kis-es	In some way kisses are idealized
Pure	15	It's the "Gal" I had.	He has been jilted.

Relying upon the apparent soundness of my own inferences (and not then realizing that the words were, in reality, touching upon a repression in my own unconscious) I, later on, asked the



patient if he could recall his reply to "Pure". I was interested to note that he had developed a complete Amnesia for the word. This clinched the matter to my mind—not only had he been jilted, but the episode was so painful, that he was still making efforts, with success, to forget it.

I then told him that I thought his trouble had an important relation to the fact that his engagement had been broken off. His reply was startling in his denial of ever having had a love-affair at all! Moreover, he now remembered, in a flash, that his reply to "Pure", had been "Sir Galahad". I then realized the unconscious play upon words which my inferences had led me to make.

This tendency has already been pointed out by Freud. It was *I* who had changed "Sir Galahad" into the "Gal I had". Later on, this word proved to be the main key to the whole situation. Proceeding with the work, the patient "blocked" for 27 seconds upon the word "Head". His resistance, in other words, became distressingly evident. At last he said "R. B.'s head", and as a recall word gave "the head in the trench"; I then urged him to associate freely upon the latter.

After a long time spent in overcoming his resistance, and with marked emotional stress, he cried out "My head!" Urged to continue, he proceeded to tell the following story—not without frequent pauses and considerable difficulty. Briefly stated, it amounts to this:—

As a boy of sixteen or seventeen, a lady staying at his home, as the guest of his mother, entered his bedroom one night, while he slept. The first thing he remembered was that he could feel her hand touching his body. She then attempted to induce him to perform the act of coitus. He, however, drew the bed-clothes around him, and, whispering, told her to go away.

Goaded to frenzy by his refusal, and springing upon the bed in such a way as to pinion him down with her knees, she forcibly performed the act of Cunnilingus upon him.

Fear, and the knowledge that this outrage was being committed upon him by a guest of the house, prevented his crying out. To struggle was impossible on account of the bed-clothes and his position. The effect of such a trauma substantiated well the emotional storm which accompanied his association "My head". Furthermore, it was soon possible to link up, by the patient's associations, the similarity between his own head and that of the



soldier (so full of the expression of horrified disgust, down-trodden, and with the "Squelching" sound). In reality, this latter head had acted like the stimulus word "Head" in the test. It had recalled a painful memory, hitherto repressed.

Later on, another trauma was brought to light in a similar, though less dramatic fashion.

About a year afterwards, the patient began to draw a certain amount of attention to himself on account of his poetic talent. He was brought into close touch with artists and poets in London, and during this period, he formed close attachments with men one of whom stood foremost in his estimation. On one occasion, this man invited him to his house and endeavoured to induce him to indulge in homosexual practices. This the patient objected to, and his friend, unlike the woman recently quoted—and this is important—desisted from his advances. (They remained good friends, however.)

Now, let us try to use the information provided by the patient, so as to gain an insight into the processes at work to produce the symptoms. Before so doing, however, I must state that shortness of time and other considerations have compelled me to abridge or cut out completely a great deal of the case material.

Here we have the case of a young boy of, hitherto, fairly normal type. His sex evolution has just reached the point where he is passing from the homosexual stage of "hero worship" to the heterosexual—the ultimate point.

At the critical moment, he is *obliged* to experience not only his first but a very terrible sexual trauma. His sense of self-assertion, now developing as it progresses towards a more extroverted form, is rudely abashed. His sexual energy can no longer progress along the heterosexual channel, because the repression has now completely dammed it up, so to speak. But the force of that energy must find an outlet, and to do so, a regression must take place. A more than normal amount of it now passes along the homosexual channel.

True, a trauma is experienced in this channel, but the damming up is not complete in this case. The circumstances show well that the patient's self-assertion was allowed to predominate. His repression here consisted of a dislike for the sexual act with, but not in a rooted hatred for, men.

This results in the patient developing a strangely morbid state



of mind. Woman cannot be loved in *any* way sexually or otherwise (if I can be understood), man is loved but not in a grossly sexual way. The patient now wastes much energy in looking for the hero-man—a perfect man, full of sympathy and understanding, a “Sir Galahad” (according to his own associations).

Here, the question of “breaking the transference” had to be tackled. It was not long before it became evident that the patient had begun to project upon the analyst his idealization of the perfect man. Nor was this anything surprising, if one bears in mind that no analysis can be at all complete, unless there exists between patient and analyst a sensible and very real degree of sympathy.

My duty was clear. By this time, the symptoms had cleared up. The patient knew why he had been afraid to sleep in the dark. With the knowledge the fear vanished. The treatment had reached its logical conclusion. It was therefore necessary to provide the patient with a full explanation of the condition of the transference, and, tactfully, to show that such a projection now would only provide a nidus for the formation of new repressions.

In conclusion, I should like to add that I became convinced that the sexual inversion was so complete that an attempt to place the patient upon the heterosexual road, once more, would now be impossible. It may be satisfactory or salutary to find the cause of any condition, but it is not always possible to restore full function. This was a case where “Sublimation” of the sexual energy was the only way likely to bring peace of mind to the patient. Hetero-sexuality was a closed channel. Homo-sexuality was open from an idealistic point of view.

This outlet—the only one—must be broadened, and the emerging force brought into play in such a manner as to serve the highest and most altruistic purposes.

The patient was advised to follow the “Way of the spirit”. It is a hard way, fraught with much difficulty, but even in these materialistic days it exists—and that is the way of “Sublimation”.

Finally I should like to draw attention to the fact that this case would appear to confirm the view expressed by Dr. Ernest Jones in that portion of his article dealing with war shock in Volume I, page 174 of this Journal, namely, “That repressed homo-sexuality plays a prominent, and perhaps essential, part in the aetiology of this neurosis”.



## DREAMS ON THE SYMBOLISM OF WATER AND FIRE

by

H. FLOURNOY, Geneva.<sup>1</sup>

I give here a brief summary of the history of a patient who has been under my treatment:

Madame C. aged 45, married and mother of three children, was towards the end of February attacked suddenly with complete retention of urine. Some days before she had lost her purse containing a good deal of money, and her husband had reproached her on the subject. As the retention persisted for more than a week, and as the patient was only able to pass urine with the help of a catheter, she was admitted on March 11th to a gynaecological clinic. Catheterisation relieved her of three to four litres of urine. Catheterisation was subsequently carried out three or four times daily. On one occasion when the nurse suddenly entered the patient's room, she was startled and involuntarily passed urine; this effect however had no lasting result.

At the end of March her medical attendant asked me to give her psychotherapeutic treatment, as her functional condition resisted all other medical measures. On March 31st. I gave her suggestive treatment. On the following day the patient was very discouraged and doubted the efficiency of this treatment; she also told me of a dream on the previous night: "There was no more water in the Rhone, and she much regretted that her husband, who was very fond of fishing, had gone to bed and was unable to take advantage of taking the fish out of the dry river."

On April 2nd. in the afternoon, she involuntarily wet herself, but in the evening, shortly after the third sitting, she passed urine normally for the first time for five weeks. After this she continued to urinate in a regular and spontaneous manner. On the third of April I gave her a fourth and last sitting. Some days after Madame C. left the home. I have made certain after several months that she has not had a return of her symptoms.

<sup>1</sup> Translated by R. M. Riggall.



Certain organic signs might lead one to say that there is in this patient a medullary lesion, but the sudden appearance of bladder trouble following an emotional shock strongly makes one presume in favour of the functional nature of these symptoms. Anyhow this was not a matter of importance from the point of view of the symbolic significance of the dream.

She had the dream the day after the first sitting, of which no other result was experienced. The patient, pre-occupied by this new treatment, and always feeling herself incapable of urinating, saw that the Rhone was dry. The urinary symbolism of dreams of rivers is well known. Everybody recalls the inference drawn by Ferenczi from a humorous Hungarian article entitled, "The dream of a French nurse", which has become classical by its reproduction in so many psycho-analytical works. I may add that Madame C. had never thought of this, having never seen it, although she had been a bookseller.

What interests us more are the sexual themes which the dream reveals. Some data from the history of the case will supplement the absence of associations. Madame C., whose children were by her first marriage, feared having conjugal relations with her second husband because they made her suffer, and she took minutest precautions to avoid the risk of again becoming pregnant.

We know from Freud's work<sup>1</sup> that dreams of water and of the bladder are associated in women with pregnancy and fertility. Rank has supported this subject by one of the most interesting versions of the legend of the birth of Kyros. When Mandane, the mother of the hero, was just about to give him birth, she saw in her dream an enormous river which flowed out of her and inundated Asia.<sup>2</sup> The vision of the dry river to our patient, like the retention of urine, came after a conjugal quarrel. On the other hand it might mean her desire to remain sterile.

What does Madame C. afterwards do in her dream? She deplores the fact that her husband being already in bed was unable to go and catch fish as he was very fond of fishing. It is dangerous to make too much of suppositions, but I wonder if our patient did not in her dream phantasy express the desire to escape from her husband and to see him look for satisfaction

<sup>1</sup> Freud, *Die Traumdeutung*. 4. Aufl. S. 271.

<sup>2</sup> Rank, *Die Symbolschichtung im Wecktraum und ihre Wiederkehr im mythischen Denken*. *Jahrb. d. Psychoanal.*, 1912, S. 114.



elsewhere than in the conjugal bed. It is not necessary to insist on the symbolism of fish.

Another point seems to confirm the hypothesis that the river, running water, represents to her the idea of fertility. When on April 2nd., in the evening after the third sitting of suggestion, Madame C. commenced to her great surprise to urinate, she dreamed on the following night that she was nursing a baby.

\* \* \*

The eight following dreams are extracts from a series given me by a medical student who was impotent, and has never tried to approach a woman. These dreams are spread over a period of several months. They have not been analysed by the association method so that their study remains very incomplete. Nevertheless their symbolism is so transparent that they appear to me to be worthy of publication. The order in which I give them is not that of their chronological succession but each one is numbered.

Independently of these dreams many symptoms show that the patient is the victim of a violent Œdipus complex, and that he has marked homosexual tendencies. In his childhood until nearly twelve years of age he constantly wet his bed during sleep. Amongst some of his infantile phantasies he used to wonder whether in order to have children, women ought not to drink their husbands' urine. Towards the age of seven he remembers amusing himself by urinating on all fours to imitate horses, as he admired the force used by these animals in the exercise of the act.

Amongst these dreams there were at first a number in which the patient experienced the sensation of urinating but found on waking that he had had an emission of semen. These urinary dreams of the adult covered, then, an erotic activity as Rank has shown by a series of examples.<sup>1</sup> In looking through the work of Freud, Jung, Sadger, and others, we see that the nocturnal incontinence of urine, so closely related to the infantile phantasies in our case, had an analogous signification and only expressed the desire for incest with the mother.<sup>2</sup>

<sup>1</sup> Rank, *Loc. cit.*, S. 95.

<sup>2</sup> Concerning this see: Jung, *Die Bedeutung des Vaters für das Schicksal des Einzelnen*, *Jahrb. d. Psychoanal.*, 1909, S. 168, and Sadger, *Über Urethralerotik*, *Ibid.* 1910, S. 409.



The subjective connection between the urinary and genital functions is apparent in the dream fragment following, where sexual ambition is still prominent.

#### I. DREAM No. 6

I climb a slight undulation in open country, following Mr. X., who is supposed to be about to make a speech. I hold under my arm an immense cylindrical object, many metres long and as large as a chimney pot; it is at one and the same time a flag staff and a sheaf of immense dandelions.<sup>1</sup>

Mr. X. represents the father in his capacity of a public speaker, he actually does make speeches in contradistinction to the real Mr. X. who does not. The latter has the reputation of being an excellent horseman; he thus has frequently between his legs an organism of which our patient envies the urinary capacity, one recalls his childish games of urinating like horses. The picture of Mr. X. which the dreamer follows, tallies with the attributes of the father and thus with uro-genital power. One can understand without difficulty, the significance of the voluminous cylindrical object and the sheaf of immense flowers which are usually associated with bed wetting. On the same night the patient experienced a pollution whilst having the impression of urinating.

#### II. DREAM No. 1

I took out my sexual organs and placed them in a glass specimen jar with physiological solution for treatment.

At first sight it seems as though the patient was in this way only expressing his desire to be treated from the sexual point of view. The picture of the glass jar and the physiological solution, an indispensable liquid to all cellular life, would easily present itself to the mind of the medical student. But there is also the question of exhibitionism and above all of castration; in order to restore them the patient has taken out his sexual organs in order to plunge them into a saline solution. The symbolic significance of this act becomes clear if we study the following dream, in which the

<sup>1</sup> ["Pissenlits", literal translation "Wet in bed", is the common French word for Dandelion. It is interesting to observe that the association of dandelions with bed-wetting is to be found in countries other than Great Britain. (Transl.)]



manifest content is quite different, but in which the latent content is comparable.

### III. DREAM No. 5

I ascend a small, narrow, and dark staircase. Arriving at the top I am obliged to stoop and flatten myself as though trying to force my way through a hole; this causes me a slight feeling of anxiety. On passing out I then find myself in the south of Sweden, where I notice the pretty fields, woods, and houses of the country. From here I see in the distance the Swedish coast, and notice a peculiar railway line going towards the north. At the same time I notice that there are three countries Norway is not to be found as in reality on the outside but is wedged in between the two others,—an image the sexual symbolism of which was apparent to me immediately on waking.

The patient subsequently added that he had seen nothing recently which would remind him of the Scandinavian peninsular, he drew a plan as it appeared to him in his dream.

The passing up the narrow and dark stairs followed by anxiety, represents coitus; the woods, houses, and mysterious railway often figure in our patient's dreams as feminine symbols. But what strikes us most is the imaginary joining up of a third country which gives to the whole a form of which the dreamer has immediately grasped the meaning, and of the fact that it is a peninsular, the coasts of which are bathed in the sea. Taking into consideration its geographical distortion, this picture has the same significance as that of the preceding dream; in both cases we see the virile parts immersed in a salt liquid, the physiological solution or the sea water. The rich symbolism of salt, to which Jones has drawn attention<sup>1</sup>, is not irrelevant in the choice of these liquids. In the first of the two dreams the castration and the bath of the organs has a therapeutic objective: — to give to the patient his sexual capacity. In the second of the two dreams the sexual act endeavours to assert itself in a symbolic form: the passage up the stairs, and the image of the immense peninsular made up of a penis and two testicles which are sunk in the ocean.

<sup>1</sup> Jones, Die Bedeutung des Salzes in Sitte und Brauch der Völker. *Imago*, 1912, B. I, S. 361 & 454.



I have no need to draw attention to the significance of water and the ocean in order to show that these phantasies of immersion mean in the case of our patient the desire to return to the maternal womb. The infantile enuresis which expressed itself in the bathing of the organs in saline solution, was already the expression of the incest complex. Also there is the adult symbolism which shows the virile parts renewed in the nourishing liquid of the reviving water.<sup>1</sup>

But there is still more. In the case of an impotent person strongly entangled in maternal attachments, this castration picture in view of a future rebirth, offers particular interest. Without doubt it can therefore be considered as a defence reaction, an instinctive reaction against the incest idea itself, and should be placed in the same category as certain initiation rites practised by savage tribes. At puberty, the initiate before coming to man's estate has to submit to a ceremonial accompanied by bodily mutilations similar to circumcision; according to Freud this merely symbolises castration. Studied in the light of Psycho-Analysis, the idea conveyed by these rites performed on the young candidate by his father or his elders, should be that of a forewarning, or perhaps also an atonement for incest and parricidal tendencies<sup>2</sup>.

#### IV. DREAM No. 4

On a strip of coast bordering the sea are three houses at the edge of the water. My mother, who happened to be there, saw that the front of my shirt was quite wet; I have the feeling of having urinated on it, but my mother remarked that it must have been a pollution. The middle house is probably a bathing establishment. Sitting quite close to me at the edge

<sup>1</sup> Infantile origins or phantasies of the same kind are probably associated with the flood myth — or better with exposure on the waves — which in the hero myths precede the rebirth. (See Rank, *Der Mythos von der Geburt des Helden*, 1909, Spielrein, *Die Destruktion als Ursache des Werdens*, *Jahrb. d. Psychoanal.*, 1912, S. 465.). Fire has the same symbolism as that of water: to destroy in order to revive. The Phoenix is consumed and born again from the cinders; hence to his funeral pyre is given the name of immortality by the students of heraldry.

<sup>2</sup> On the Castration Complex, see: Rank, *Das Inzestmotiv in Dichtung und Sage*, 1912, S. 283. Reik, *Die Pubertätsriten der Wilden*, *Imago*, 1915. B. IV., S. 125 & 189.



of the water, are two enormous ostriches. As I approach them they get up, and under each one I find a little ostrich. They are not then a pair, but two females; I try to touch the fluff on the tip of the wing of one of them, but she escaped. Both entered the water and made magnificent dives. I have a very vague impression that Madame T., or my mother, who was in the house, scolded me for having caused the ostriches to go away. At the end of this dream I felt as if one of my teeth had come out; applying my finger I found that the whole enamel coat had become detached without otherwise doing any harm.

The significant number of three houses at the edge of the water, one of which is a bathing establishment, without doubt has the same sexual significance as the three Scandinavian countries; this is confirmed by the incident of urinating or of pollution in the presence of the mother, an incident, interposed at this moment of the dream, which betrays the incest complex. The huge ostriches each covering a smaller one, in view of bisexual symbolism, represent at the same time feminine fertility and probably the two testicles. (Compare the two huge birds with the immense cylindrical object which symbolised the penis in the first dream.) The plunging of the ostriches into the water symbolises the immersion of the organs in the maternal womb. The mother's reproaches and the incident of the finger and detached tooth are connected with onanistic phantasies and the pollution. This was actually referred to in a dream occurring on the same night, but which I cannot enter into here as it would unduly lengthen the subject.<sup>1</sup>

#### V. DREAM No. 3

I am in a room with some other people, one of whom is a lady (Madame T.?). She and I arrange a sort of brush, and in order to soften the bristles, I am applying glycerine and collodium to it with a small paint brush. Then all the lights are put out. When the lights are turned on again, the lady finds that she

<sup>1</sup> On the symbolism of numbers and teeth dreams, see: Freud, *Traumdeutung*. Stekel, *Die Sprache des Traumes*, 1911. — On that of birds: Maeder, *Interpretation of a few Dreams*. *Archives de Psychologie*, 1907, Vol. VI, p. 372. Rank, "Traum und Mythos" in Freud, *Traumdeutung*, 4. Aufl., S. 399.



has polished the brush in such a way as to have transformed it into a rectangular object striped with alternate bands of green and black—like the ribbon of 1870.

Madame T. is the same person who was confounded with the mother in the preceding dream. In her company, the application of a slimy liquid (glycerine or collodium) to the bristles of the brush may pass without comment. We find here the disguised motive of incest. As a reward for this act performed by a young man who is ashamed of impotence, we have the symbolism of the insignia of the brave in the ribbon of 1870. The part played by the extinction of the light affords a dividing line between this first series of dreams and those following, in which the sexual meaning of fire is apparent.

#### VI. DREAM No. 8

My uncle, aunt, and I alight from a tram at the terminus station to go for a walk in the woods. It is an uncultivated part. The beautiful woods remind me of the place where I saw a house burning in a preceding dream. There must also be a fire in some part of this wood. Scarcely had I left the tram with these two people, when I asked them why their son had not come, and my aunt replied: "He has not come because he practises voluntary denial."

The fire in the wood in which the uncle and aunt are walking, (*i. e.* the father and the mother) can be at once seen to symbolise their marriage relations. If their son, with whom the patient identifies himself, has not come, it is because he practises self-denial. This expression in a clearly sexual sense means that the continence of our patient quite deprives him of the gratification of fire.

#### VII. DREAM No. 2

I find myself at the edge of a sort of well, at the side of a house. On the top of this well which is perhaps five metres deep there are poised two or three windows. I notice that smoke is emerging from the small windows like the commencement of a fire; I warn the people who are standing near me, one of whom is a servant—a virgin. She descends into the well and disappears without having stopped the



smoke. I become uneasy, and see coming out of one of the windows a girl completely naked, and apparently an idiot. I find on my left two little watering cans full of water, which I pour over the girl. She comes out of the well as if she were in the air, and I notice that her back is wet with the water which I have poured over her; I am struck with the beauty of her black hair, thickly spread over her white shoulders, and I cannot refrain from lightly patting her shoulders with my hand; at that instant I ejaculate against the wall of the well and wake up.

In this erotic dream—the dream pollution is in fact produced simultaneously—the water has a double meaning. Shut up at the bottom of the well, it probably symbolises the female genital organs. The two watering cans which the patient holds (the testicles) represent the natural sprinkling which the male delivers to the female. As for the other elements of the dream—the idiot girl down whose back the water runs, the black hair, the tap on the shoulders—unfortunately the lack of associations will not allow an interpretation. The essential characteristics of this passionate dream are the coexistence of fire and water destined to extinguish it.

Fire and water are opposites having mutual relations and often figuring in erotic symbolism, as Freud has shown us in his analysis of the case of "Dora" and elsewhere<sup>1</sup>. This association is seen in the form of symbolic actions found in certain incendiaries. In one case an impotent man seemed to find a substitute for his genital functions in incendiary acts, having without any conscious motive set on fire a dozen farms in a few years. Each time he committed the crime he seemed to be possessed by an irresistible compulsion to extinguish the fire of which he was the cause, and his zeal gave him certain rewards of which he was afterwards ashamed<sup>2</sup>.

We end with an anxiety dream, which undoubtedly arises from certain onanistic phantasies, and shows still very clearly the association between water and fire.

<sup>1</sup> Freud, *Bruchstücke einer Hysterieanalyse*. Neurosenlehre, 1909, 2. Folge, S. 63.

<sup>2</sup> I have published this case in "Notes on four cases of Obsessions and Compulsions of sudden onset." Read before the Medical Society of Geneva, Feb. 1917.



## VIII. DREAM No. 7

I am at the side of a fountain and just going to speak to someone who is opposite to me. At the same time I hold in my hand my erect penis which assumes enormous proportions. It expels some liquid in a continuous jet, and I certainly have a feeling of strength and virility although there is no actual voluptuous sensation. The organ assumes such proportions that I begin to get uneasy, and its extremity is transformed into the head of a serpent; it squirms about in every direction and I begin to be afraid because it tries to bite my hand; also I am under the impression that it is no longer liquid but fire which it spits out of its mouth. I awake, and instinctively see the image of the head of a certain woman whose coiffure is composed of serpents. (No pollution took place.)

The longing for sexual power and virile propensities could not be expressed in a more forcible way. Besides, the symbolical similitude of fire and water as generative elements could not have received a clearer demonstration.

In conclusion permit me to digress, and to compare the contents of this dream with certain emblazoned figures which are sometimes found on very ancient armour: A serpent which vomits flame or swallows a child. I think the students of heraldry are mistaken in their interpretation of this last figure; the animal does not swallow the little creature as they believe, but vomits it. This seems to me to be the simplest explanation; also it is preferable to the one which compares the serpent to the monstrous beast whose rôle, according to mythological legends, is to devour the hero. If the serpent vomiting fire represents the idea of creative power, one can understand that this idea can be symbolised still better by the picture of the serpent vomiting the child.

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In these dreams there are sometimes sentiments of inferiority (II) or of sexual ambition (I, VIII), sometimes erotic tendencies (III, VII) or plain incestuous feelings (IV, V), which display themselves in a symbolic way by borrowing the images of water, liquid, or fire. In several of them pollution confirms in an objective manner the special nature of the unconscious tendencies. Under their apparent diversity, dreams only express the fundamental complexes which are the basis of the psychoneurosis; but we must be careful to



guard against saying that these complexes of infantile origin, should be regarded as the "causes" of the dreams of the adult and of his other morbid symptoms. It is sufficient for us to have demonstrated that these diverse psychological manifestations present in themselves certain connections which can be fitted together<sup>1</sup>.

Many readers will not be convinced; they will regard these interpretations as exaggerated, or even absurd. But this article is not intended to convince; it is addressed solely to those who may have observed analogical symbols among the same kind of patients. The dreams which form the basis of this work should appear sufficiently clear, in spite of the absence of associations which, alone, would have given all the scientific rigour necessary for their study.

<sup>1</sup> We make this remark because of Jaspers' criticism that Freud confounds intelligible with purely causal relations. This criticism, which perhaps is the strongest addressed to the Freudian school, should be taken into consideration; it is itself open to serious objections which have been exposed by Binswanger, amongst others (*Kausale und verständliche Zusammenhänge etc. Internat. Zeitschr. f. Psychoanal.*, 1913, B. I, S. 383.).



## A LINGUISTIC FACTOR IN ENGLISH CHARACTEROLOGY<sup>1</sup>

by

ERNEST JONES, London.

The definition of national character traits is notoriously treacherous ground, but in all attempts to describe those most typical or general among English people one is always mentioned with such unvarying emphasis that it is hard to resist the conclusion that it must relate, however roughly, to some group of observable phenomena. I refer to the striking insistence of the English on propriety, which is commented on not only by practically all foreign observers, but also by Americans and our fellow-subjects from overseas, not to speak of the "Keltic fringe" in our own islands. That it degenerates into prudishness here more often than in any other country, at least in the Old World, will also, I think, be widely admitted. The trait is probably to be correlated in some degree with the proneness to reserve, the absence of social gifts, the dislike of betraying emotion of any kind, and the horror of self-display, vaunting, braggadocio, gasconade, rodomontade — one sees that we have to use foreign terms to indicate attitudes so foreign to us — which also belong to the judgements passed on the English by foreigners. Psychologically the group in question might perhaps be described in McDougall's language as a deficiency in the self-regarding instinct. Psycho-analysts would call attention to the secondary nature of the phenomena as indicating the existence of what is called a reaction-formation, and indeed that something is being actively controlled or avoided is fairly evident; they would probably ascribe the traits to a reaction against more than one complex, repressed exhibitionism being perhaps the most prominent. However this may be, it has occurred to me that there is possibly a connection between this group of character traits — which, for convenience, might be referred to as the propriety trait — and a peculiar historical feature in the development of the English language, but before submitting this idea

<sup>1</sup> Read before the British Psychological Society, March 14th, 1920.



for your consideration I shall have to make a few remarks on some general psychological aspects of speech.

There are good grounds for believing that speech originally was a far more concrete activity than it now is, and it has indeed been maintained that all speech represents pretermitted action.<sup>1</sup> Plain indications of this are to be observed among less cultivated human beings, especially children and savages. Freud<sup>2</sup>, for instance, following Groos, points out that children treat words as objects in the various games they play with them, while Frazer<sup>3</sup>, in his section on Tabooed Words, brings forward a mass of evidence illustrating the extraordinary significance attached by primitive races to words and especially to names. He says, following Tylor: "Unable to discriminate clearly between words and things, the savage commonly fancies that the link between a name and the person or thing denominated by it is not a mere arbitrary and ideal association, but a real and substantial bond which unites the two in such a way that magic may be wrought on a man just as easily through his name as through his hair, his nails, or any other material part of his person. In fact, primitive man regards his name as a vital portion of himself and takes care of it accordingly." He cites<sup>4</sup> the example of the Sulka of New Britain who when near their enemies speak of them as "rotten tree-trunks", "and they imagine that by calling them that they make the limbs of their dreaded enemies ponderous and clumsy like logs. This example illustrates the extremely materialistic view which these savages take of the nature of words; they suppose that the mere utterance of an expression signifying clumsiness will homœopathically affect with clumsiness the limbs of their distant foemen. Another illustration of this curious misconception is furnished by a Caffre superstition that the character of a young thief can be reformed by shouting his name over a boiling kettle of medicated water, then clapping a lid on the kettle and leaving the name to steep in the water for several days." Of the innumerable examples from the field of taboo one may be quoted:<sup>5</sup> the Alfoors of Poso are not only not allowed to mention the

<sup>1</sup> Ferenczi, Contributions to Psycho-Analysis. (Engl. Transl.) 1916. p. 120.

<sup>2</sup> Freud, Der Witz und seine Beziehung zum Unbewußten. 1905. S. 105.

<sup>3</sup> Frazer, Taboo and the Perils of the Soul. 1911. Chapter VI.

<sup>4</sup> *Ibid.* Op. cit. p. 331.

<sup>5</sup> *Ibid.* Op. cit. p. 340.



names of their parents-in-law, a common enough prohibition, but if such a name happens to be the same as that of a thing — *e. g.* in English a Mr. Lake — then they may not mention even this thing by its own name, only by a borrowed one. Even with us the use of bad language by children is treated as a sin of no mean order, and the law of England can still condemn a man to imprisonment for making use in public of certain forbidden (obscene) words, the utterance aloud of the heinous words being in both cases regarded as equivalent to a nefarious deed.

The nature of this primitive material conception of words and speech can be described more exactly. One of the conclusions emerging from Freud's work on the psychology of wit and of dreams is that all words originally possessed distinct motor and perceptual qualities, which they gradually lose more or less completely in the course of mental development. As has been interestingly expounded by Ferenczi<sup>1</sup>, there is a class of words, namely, obscene words, which, probably because of their being excluded from the usual course of development, still retain these qualities in a full measure. On the perceptual side Ferenczi<sup>2</sup> remarks that a word of this kind "has a peculiar power of compelling the hearer to imagine the object it denotes in substantial actuality", and adds "one may therefore infer that these words as such possess the capacity of compelling the hearer to revive memory pictures in a regressive and hallucinatory manner"; he calls attention to the fact that delicate allusions to the same ideas, and scientific or foreign designations for them, do not have this effect, or at least not to the same extent as the words taken from the original, popular, erotic vocabulary of one's mother-tongue. On the motor side the following three illustrations may be mentioned: the aggressive tendency which Freud has shewn to underlie the uttering of obscene jokes — this being a substitute for a sexual aggression; the curious perversion of coprophemia in which the sexual act consists solely of uttering indecent words to women; and the obsessional neurosis, where the act itself of thinking is curiously sexualised in the preconscious in such a way that the impulsion to think certain thoughts comes as a substitute for forbidden acts. In all these cases the act of thought or speech is psychologically the full equivalent of an actual deed.

<sup>1</sup> Ferenczi. *Op. cit.* Chapter IV.

<sup>2</sup> Ferenczi. *Op. cit.* p. 116.



As was remarked above, in the course of mental development the motor and perceptual elements become more and more eliminated from words, and in purely abstract thought they disappear altogether. It may be recalled that Galton many years ago pointed out how much less capable of abstract thought are as a rule persons of a pronouncedly visual or auditory type as contrasted with those whose thought processes contain only feeble perceptual elements. One may also in this connection refer to Freud's latest conclusion on the unconscious,<sup>2</sup> namely, that the essential difference between unconscious and conscious ideas is that the former consist only of ideas (which easily regress to images) of the object or process, whereas the latter contain as well the idea of the corresponding word. Thus unconscious mentation and abstract thought stand at the two opposite ends of the scale in this respect, the ideas of the former being near to perceptual imagery, those of the latter being almost completely divested of it.

It is evident that this process of gradual abstraction effects a great economy of thought; indeed, without it none of the higher forms of thought could occur. It is probable that this economical (factor is of prime importance in bringing about the process in question, but it has to be remarked that this is accompanied by other important psychical changes as well, which probably also stand in) a causal relation to it. I refer to the inhibition in feeling that goes with the progress from the motor-perceptual stage to the abstract one, and the valuable saving in expenditure of emotional energy that this signifies. There is thus a double economy, an intellectual and an affective one. The affective economy, to which I wish to draw special attention, may be illustrated from two sides. On the one hand, when there is a need to express unusually strong feeling recourse is commonly had, through regression, to the use of just those words which have retained their motor and perceptual elements, as in oaths and obscene language, a procedure much more manifest in the male sex because of their having been to a less extent the subject of repression in this sex. The desire for expression combined with a sense of incapacity for it, so common in the young, similarly results in the phenomenon of slang. On the other hand, when there is a special need to inhibit feeling recourse is had to the use of abstract, or at all events less familiar words. It is well known that an otherwise forbidden idea

<sup>2</sup> Freud, *Sammlung kleiner Schriften*. Vierte Folge. 1918. S. 334.



can be readily expressed if only it is veiled in a euphemism or translated into a foreign tongue. Most books on sexology, for instance, contain whole passages written in Latin. The reason is that the vulgar, familiar words would tend to arouse embarrassing feelings, in both speaker and hearer, which can be avoided by the use of foreign, unfamiliar, or abstract words which have been acquired only in later years.

After this long digression I now return to the theme of English characterology. Without entering on a discussion of the numerous individual, social, or racial forces making for repression and inhibition, I can only think that such a process must be favoured if one of the main instruments by means of which it is carried out is peculiarly accessible. Thus, if it is unusually easy to give vocal expression to forbidden ideas in a way that inhibits the development of feeling it seems to me to follow that in such circumstances feeling will be more readily and extensively inhibited. Now it is clear that this is just the situation in which the English race has been placed for nearly a thousand years. The Saxon and Norman languages, after living side by side for about two centuries, gradually coalesced to form English, but to this day there is in most cases an obvious difference in the "feel" of the words belonging to each, and still more between words of Saxon origin and Latin words more recently introduced than their Norman-French precursors. All literary men recognise the distinction clearly, and every text-book dealing with style in writing urges the student to choose the Saxon words wherever it is possible without being precious, as being more vivid, robust and virile, *i. e.* because of their greater capacity to arouse plastic images and feeling-tone. Our store of synonyms is unequalled by that of any other European language, and the difference in the respects I have mentioned between such pairs as house and domicile, fatherly and paternal, book and volume, is quite patent. The existence of this double stratum of words enables us to indulge in fastidiousness to a degree not open to any other nation. Most culinary terms are, for historical reasons, of Romance origin, and the difference between being invited to a dish of veal or pork and one of calves' flesh or swine flesh is very perceptible. No other nation is unable to use its native word for belly if need be, but we have to say "abdomen", and that only with circumspection. In English a lady is gravid, pregnant, or enceinte, there being no



single native word to describe the phenomenon. The process in question can often be followed in its stages, such as when the Saxon word "gut" gets replaced first by the Norman-French "bowel", and then, when this is found too coarse, by the Latin "intestine".

The suggestion I make, therefore, is that the development of the outstanding English character trait of propriety has been fostered by the peculiar nature of the English language, one resulting from the success of a Norman adventurer some thousand years ago.



## THE WISH TO BE A MAN

by

HANNS SACHS, Berlin.<sup>1</sup>

The patient whose case I am presenting was a very intelligent young girl aged about twenty, belonging to a refined and religious family. She came for Analysis not on account of any strongly-marked neurotic symptoms, but because she was burdened by uncertainty and anxiety, and was unable to concentrate her thoughts or form plans for the future, although her difficulties were not sufficiently great completely to prevent her carrying out her duties. It was only later on, after the analysis had progressed considerably, that she recalled a marked neurotic symptom which had appeared after puberty (at about the age of fourteen), and had become repressed again, namely, the obsessional idea, (which had caused her much suffering), that when she walked out of doors all the passers-by could see her genital organs. At the very beginning, when I asked her to tell freely all her thoughts, she declared, after some hesitation and with all the signs of an inward struggle, that she felt unable to comply with the fundamental principle of Psycho-Analysis (*i.e.* to utter everything which came into her mind) until she had made a full confession of something that had oppressed her ever since her youth. When she was aged twelve and a half she had spent some months in the house of an aunt, and a boy cousin, about a year older than herself, had been her playmate. In those games which had a sexual background, the kind common among children of this age, these two had gone rather far in overt action. Beginning with merely viewing and touching each other's genitals, they had arrived finally very near to the act of sexual intercourse. I was obliged to piece together all this from the hints she dropped, for though my patient was too intelligent to be a prude in the ordinary sense, nevertheless she could not bring herself to relate these incidents clearly and coherently. I surmised, and my guess was confirmed by the patient herself, that she was oppressed by the fear of having lost her

<sup>1</sup> Translated by Barbara Low.



virginity at this time. After this episode she had experienced great depression, feeling herself morally depraved and unworthy to mix with her sisters and comrades. She had never confided in anyone, and her mother was the only person who knew anything about the matter. When I asked how her mother, who had not been present at the time, came to know about it, she replied in an astonished way that she really did not know—it had never occurred to her before to consider that question. In addition, she told me that since her early childhood she had not been on very confidential terms with her parents who were too pious and narrow-minded for her. As a result of these wrongdoings in childhood she developed an abhorrence of sexuality in actual life and in Art, and an intense dislike to being touched, still more to being kissed, by a man. At her sister's wedding she hid herself immediately after the ceremony to avoid kissing her new brother-in-law. She could never listen when her comrades spoke of sexual matters, and she declared that she was eighteen when she learned for the first time, at college, of the difference between the male and female genitals, of the facts of procreation, and of childbirth. At this stage I interrupted her with the remark that her experiences with her cousin should have sufficed to open her eyes as to the difference between the two sexes. She still, nevertheless, firmly maintained that she had remained ignorant of these facts until her eighteenth year, although she could not herself reconcile this with her earlier experiences.

I wish to point out here that this is a typical instance of a repression which did not completely succeed. The traumatic occurrence itself remained in consciousness, but all connecting associations with the rest of the conscious mind were completely eradicated, and the tendency to throw off this memory had thereby hindered her from profiting by it to obtain knowledge on sexual matters. Further we shall see shortly that her memory of this significant occurrence was far from being complete, but as regards some important points had failed her owing to the repressing tendency.

During the first interview, which lasted two hours, I was struck by a peculiarity of my patient—one which made rather large demands upon my self-control. This was her quite extraordinary restlessness: sometimes she would throw herself to the right side, then to the left; or, lying on her back, she would draw her feet



upwards and throw them straight out again suddenly; sometimes she sat up to straighten her dress, or fidgetted along the wall with her hands, or played with her handkerchief, or fumbled in her hair, and so forth. I finished this sitting with some quieting explanations which made some impression upon her, but neither then, nor later, was her general condition changed, nor her unrest. During this first interview she related to me her earliest remembrance: a stranger (a man) had taken her on his knee and she had bitten his ear. In every way she had been a wild child. She would never play with dolls, and for playfellows she chose, not girls, but the wildest and most unruly boys with whom she tried to compete. After this narration she gave vent to complaints—often repeated in subsequent sittings—concerning her feeling of inferiority as a woman. She thought that the best and cleverest of the young men with whom she was acquainted would refuse to accept a girl as a real comrade, or to let her share in their serious masculine interests. A superficial observer would have deduced that this inferiority-feeling was the core of her depressed condition.

The second interview brought about two important communications. Since the previous sitting, the patient had—without any orders from me, naturally—enquired of her mother how she had come to know about the episode with the cousin. The mother had given the surprising answer that my patient herself had confessed all, apparently without external reason, shortly after the occurrence, when the family moved to a new residence. A second communication made to me by my patient was that although she was accustomed to sleep long hours and deeply, she was very restless, sometimes tossing about, talking, and even getting up in her sleep without knowing it. Further that the night after our first interview a very curious thing had occurred. When she was called in the morning, it was found that she had got up during the night in her sleep and had bolted the door. This was easily interpreted as a transference, by way of unconscious phantasies, of her youthful sexual experiences on to the person of the Analyst, and the matter of the transference having thus started favourably, the work of Analysis proceeded quickly.

After three months of Analysis we reached a phase in which the patient always told her dreams (which she remembered very clearly) without being able to give any useful associations, so that



the interpretation remained very incomplete. The theme of these dreams was always some forbidden act carried out by the dreamer: once she dreamed that she entered a house against the will of the owner, and another time that she stole flowers from someone's garden. After some time had been spent in endeavouring to interpret her dreams, there suddenly came to the surface a remembrance, repressed hitherto, which contained a most important part of the patient's sexual life. She now quite clearly remembered that about the age of fifteen or sixteen every night in bed she had a vision that Christ lay at her side and repeated with her the sexual acts she had experienced with her cousin, so that she felt a very vivid sexual excitation. Although this phantasy was so repulsive to her that she dreaded to go to sleep, she gave way to it for some time. Such a phantasy is a typical offspring of infantile masturbation, and very likely in the course of the phantasy masturbation was actually carried out unconsciously by pressing together the thighs, although of this the patient had no recollection.

After having produced this remembrance, she at once came to another theme which seemed closely associated with the former. She related that her first menstruation had taken place a short time after her return home from the visit to her aunt; she knew no details about the occurrence, only that somehow she had been very much surprised by it. She remembered also that her elder sister had told her that she had been on a visit when the first menstruation suddenly appeared, and had been so much taken by surprise that she had called for help.

The Christ-phantasy was the first instance of masturbation which came back to the patient's consciousness, and now the connexion between the different facts, hitherto so obscure, became quite clear. By means of the erotic scenes with her cousin her sexuality had been prematurely aroused in a high degree. After separation from her companion there was no other way open to her to satisfy her roused desires save by masturbation. When the first menstruation appeared, she saw in the sudden flow of blood a punishment for her misuse of her genital organs, and in her terror and contrition was impelled to confess to her mother her secret misdeeds with her cousin. The remembrance of her sister's great fright over her first menstruation was a so-called "cover-memory" for the since-repressed disturbances in her own mind over the similar experience of her own. There remained only one



open question, and others, more definite, followed later on. Why was it that the terror roused by the bleeding genital had been so strong and remained unmitigated, although without doubt the mother had explained that this was quite a normal occurrence?

The material I had previously obtained allowed a conjecture on the question. I knew already that she had a vague remembrance of something that had happened in the days of her early childhood when she was about four or five years old. She knew that she had done something of a forbidden and sexual character with a boy playmate of the same age. In telling about this she discovered in her memory—without the slightest idea of its meaning, or where she had picked it up—the vulgar word for the sexual act in the language of the country where she had lived from her birth until her tenth year. I thought it justifiable to assume that at this time (of the forbidden act) she had seen her playfellow's genital organ and this had caused her envy. She had naturally asked herself why she was lacking in this important part, and had given herself the answer that it had been somehow taken away from her as a punishment for misusing it. This experience, therefore, would have been the prototype of the later sexual acts with her cousin, and the source of her anxiety. It tallied well with my conjecture that she had (as I heard later on), about the same time, tried by every means in her power to annoy her nursemaid; although ordinarily very kind-hearted, she had behaved most cruelly to this person, without any conscious motive. Probably a threat used by the nurse in connexion with the patient's infantile onanism had aroused this hatred. This conjecture I communicated to her with all possible caution. She remained silent for a long time, and then asked suddenly: "What is the meaning of biting one's own hand?" I answered her by another question, namely, whether in this case, "one" did not stand for "I". I added: "If you have this habit you will understand it now, without my help." In reply she gave the interpretation to be as follows: She had believed earlier that her male genital organ had been bitten off

I will point out here that this belief, curious as it may seem, must once have been very widespread. Numerous ethnological parallels exist: a great majority among primitive peoples hold that a woman in menstruation has been bitten in the genital organs by some demon.

The earliest remembrance from her childhood is therefore a



"cover-memory", serving to obliterate from her memory the most painful impression, and substituting for the idea of being bitten the opposite idea of biting. This turning of passivity into activity became an important character-trait. Henceforward biting was an unconscious outcome of her repressed tendencies, and in satisfying these she punished herself by hurting the hand—the instrument of her early guilt. This, too, was the reason why she was unable to kiss, even on such a formal occasion as her sister's wedding.

From all this, the envy regarding men and inferiority-feeling of the patient and her desire to be a man are revealed in quite a new light. That we had discovered the truth was demonstrated by the result: from this moment her restlessness entirely disappeared. Without having formed any plan, without struggle or exertion, she was able to lie motionless and continued to do so, excepting on certain occasions of great emotional stress, during the remainder of the Analysis.



## AN INSTANCE OF THE CARE NEEDED IN DRAWING CONCLUSIONS

by

DOUGLAS BRYAN, London.

A patient whom I am treating by psycho-analysis came the other day for her usual sitting. She was wearing a long fur coat which a few days previously she had received back from the makers after it had been renovated with a new silk lining. She took it off and placed it folded inside out over the back of the couch upon which she settled herself. She then related a dream she had had the night before. After telling me the dream she asked if she might refer to a little book in which she had made some notes of the dream. She said the book was in the pocket of her coat. I agreed to her request, and she reached up and placed her hand in the pocket of the coat which was situated in the lining and on the left side of the coat; the pocket was quite obvious as the coat was lying across the back of the couch. She felt in the pocket and immediately exclaimed, "Why, the book is not here". She said that she was certain she had placed it in the pocket just before she came out, and now it had disappeared. She was very much disturbed and felt that there was something uncanny about its disappearance. She got up from the couch and looked about the room to see if she had dropped it. As she could not find it she sat down again still very distressed, and assured me that she had placed the book in the pocket. In despair she snatched the coat off the back of the couch on to her knees and again placed her hand in the pocket, when she suddenly exclaimed, "Why, here it is", and she brought out the book from the pocket. The book was a very thin one about four inches long by two and a half wide and covered in cretonne; it had only two or three pages in it for notes. I might add that when she first placed her hand in the pocket she found in it a small hole, but this was too small for the book to have slipped through.

The note she had made in the book and which she at first



had assured me was quite unimportant eventually turned out to be of great importance and had decidedly unpleasant associations.

I consider that one was perfectly justified in concluding that the patient's failure to find the book in her pocket when she first felt for it was motivated by the unconscious desire not to produce the book on account of the unpleasant things that would arise from the notes it contained. Further, I see no reason from the above description why one should not quote this case as an instance of what one might call "obliteration of the sense of touch due to unconscious motives". However the sequel to this story will show that an apparently justifiable conclusion falls to the ground when certain other factors are known, and a pretty instance of "obliteration of touch" is negated.

This is the sequel. Three days later the patient came for her usual daily sitting and again appeared in her fur coat. She removed it and placed it in the same position as before. Again she wanted to refer to the little book, and laughingly said, "I hope I shall find it this time all right". She put her hand into the pocket just as she had done before and exclaimed in a horrified voice, "Good gracious, it's not here". Her distress was most marked. I immediately asked her to hand the coat to me so that I could feel in the pocket, for it struck me as extraordinary for the same thing to happen on two occasions so close together. I felt in the pocket and told her the book was not in it, but that there was a large hole through which the book could pass. She said that evidently the hole had got much bigger. I suggested that the book had worked its way down in the lining of the coat and felt about for it, but I could not feel it anywhere near the pocket. I then thought it might have travelled round the coat through her movements in walking to my rooms and therefore felt all round the coat. At last I felt it and said, "Here it is, right round the other side"; she seized the coat and immediately remarked, "Why, there are two pockets in it, I did not know that before", and pulled out the book.

Now for the explanation. Before coming to my rooms she had placed the book in the pocket in the lining in the *left* hand side of the coat. She had only had this one pocket in the original lining of the coat. On removing her coat in my rooms she had folded it so that the *right* hand lining pocket was uppermost and this she had first of all put her hand in when she failed to find



the book on both occasions. When she pulled the coat on to her knees she, apparently unknown to herself, turned it so that the left hand pocket was uppermost and the same thing occurred when she took the coat from me, and now of course she found the book which had been in that pocket all the time. Thus her touch had not been obliterated, for there was no book in the second pocket.

The patient's apparent ignorance of the presence of the second pocket of course needs some explanation, for it is hardly conceivable that a lady would miss seeing the pocket in looking over the renovated lining. But this point is outside the scope of this note. These few remarks teach the lesson that entirely unforeseen factors may easily render an assumption valueless, and further that it is often dangerous to come to hasty conclusions.



## A REVIVED SENSATION-MEMORY

by

BARBARA LOW

The Patient was a woman of thirty-five, who came to analysis on account of an obsessional phobia, namely, that she might hurt or kill persons with whom she came into contact.

One day, while waiting to begin the analysis hour (in my absence), she took a book from the shelves. When I came in, she put back the book (the title of which I did not see) without any comment. On her arrival about four days after this episode she began at once very eager, to relate a memory which had come to mind the evening before for the first time since childhood, and seemed to spring from thinking over, on that evening, the book she had glanced at four days previously in my room. The book was a volume of poems entitled "Look! We have come through", by D. H. Lawrence, a book which she had not heard of before this occasion. On the paper wrapper of the cover was a "cubist" representation of curves and rectilineal planes, in black and white.

My patient began by telling me that on the previous evening she was sitting idly meditating, and this book came into her mind: she had not seen the contents when glancing at it in my room, merely the cover. Thinking over it, she was much interested in the *Title* ("Look! We have come through") which she assumed was meant in *her* sense of the words, namely, that some force or element striving in a human being—most likely a violent or evil force—had succeeded in emerging. She added that this was always the situation she felt in herself—some sort of evil spirit was perpetually struggling to "get through" and forcing her into her evil actions (or desires) of hurting and killing. She then went on to record that the drawing on the cover had returned to memory at the same time, but she felt no interest in it—it was meaningless her—and she dismissed it from her mind.

Soon after this reverie she went to bed, and before she fell



asleep, there came to her mind the memory which she now related.

Between the ages of four and six years, she had two or three times over a very vivid image, usually in the morning, upon waking. This image was one of herself coming through a long passage of tubular shape, its sides a yellowish-brown in colour, at the end of which was a small round hole through which a bright white light streamed. She herself seemed to be moving up this tube towards the light, and when the revived image came to her that night she felt distinctly, so she said, that "it was very like the words of the title, "Look! We have come through", and also that she "was moving with a rhythmic motion similar to that suggested by the curves and lines on the wrapper of the book". She added that she had some sensation of pleasure in remembering this image, and she had a feeling that there was something sexual about the sensation. This image, she now remembered, had been identical in all details each time (two or three in all) it had appeared in this childhood stage: since the age of six, till that night, it had never recurred.

Some points of interest in this revived memory would seem to be as follows:

(1) The question as to whether this is a birth-fantasy evolved from fantasy proper, or whether it can be founded on sensations actually experienced in the birth-process.

(2) The interpretation given to the title "Look! We have come through". For days preceding the day on which she glanced at the book in my room, she had been considering her own problem, and how she should resolve it, and "come through" to a more harmonious situation (she herself actually used the phrase "come through"). Yet when the book came to memory four days later, this association was entirely absent (she commented on this with surprise in the following analysis, saying, "How strange that I never thought of the more ordinary meaning of the title—to come through some experience or difficulty") and the one directly connected with her own phobia was present.

(3) The repetition of the image in childhood in identical form as far as she remembered.

(4) The physical sensation revived by the "cubist" cover-design. This suggests that possibly some explanation of the dislike of cubist forms may be found in the sexual suggestion they convey.



## A SUBSTITUTIVE MEMORY

by

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A patient was temporarily unable to recollect the word "sepia" and while he was trying to do so four substitutive words, obviously incorrect, came to his mind instead. Two of these were the words "bastard" and "Lebanon", and I propose to describe only the analysis of the latter.

His first association after ultimately recalling the word "sepia" was the curious feeling that the last two letters ought to be separated from each other, *i. e.* that "I" (which he interpreted as meaning himself) should not be in contact with "A". This was followed by a series of associations all of a feminine connotation, indicating that the word "sepia" was connected with the idea of femininity. His first knowledge of the word dated from childhood from a tube of what he called "brown sticky stuff" in his sister's paint-box, and I surmised that it was probably related at that time, as is almost invariably the case in childhood, to some forbidden smearing impulse.

The word "Lebanon" brought the following associations: Cedars of Lebanon — cedar-wood oil — the use of this for the high-power oil-immersion lens — the memory that on the previous day he has spent several hours examining his own semen microscopically to find out how long spermatozoa could remain alive — his current interest in this topic because of his wish not to impregnate a girl with whom he was just entering into an intimate relationship (*cp.* the other substitutive word "bastard", and his first association that he was not to be brought into too close contact with something feminine) — a passage he had once read to the effect that recurrent masturbation (from which he suffered) led to the emission of a brown fluid instead of semen, a state of affairs to be avoided.

It is known that the idea of impregnation is often unconsciously equated to that of contamination with other bodily material, an



association doubtless dating from early childhood theories and one which persists in its crude form in the perversions of throwing ink, defiling statues, etc., and it is probable that the inhibition responsible for the forgetting of the word "sepia" emanated from the group of fears and prohibitions indicated above. But the main interest of the example is the truly extraordinary displacement from these ideas to the word "Lebanon", one evidently facilitated by the identity of the first syllable in the three words "sepia", "semen", "cedar".



## COLLECTIVE REVIEWS

### EDITORIAL NOTE

As was indicated in the first number, we propose to publish in each of the numbers of the first Volume collective reviews dealing with the progress of the past six years. Reviews and abstracts of current work will begin only with the second volume. The collective reviews of the present and next numbers are translated from the "Bericht über die Fortschritte der Psychoanalyse in den Jahren 1914—1919", but it should be noted that they are greatly condensed, so that readers who wish fuller accounts, and also more complete bibliographies, are advised to procure the original review<sup>1</sup>.

## THEORY OF INSTINCT AND SEXUALITY

by

ED. HITSCHMANN, Vienna.<sup>2</sup>

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<sup>1</sup> Published as "Beiheft" Nr. II of the *Internat. Zeitschr. f. Psychoanal.*

<sup>2</sup> Translated by J. C. Flügel.

<sup>3</sup> In the following Bibliographies *Jahrb.* stands for *Jahrbuch der Psychoanalyse*, *Zeit.* for *Internationale Zeitschrift für Psychoanalyse* and *Zbl.* for *Zentralblatt für Psychoanalyse*.



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### Libido : Narcissism : The Taboo of Virginity

Psycho-Analysis continues to conceive of the Libido (Sexual Hunger) as distinct from other sources of psychic energy, as possessing its own peculiar chemical characteristics and as constituting a quantitatively variable force, in terms of which processes and changes in the field of sexuality can conveniently be measured (8). The direct psychic equivalent of the Libido related to the activity of the various bodily organs is termed *Ego-Libido*; when this energy is directed to an outer object, or is transferred from one outer object to another, it is called *Object-Libido*. When it is withdrawn from an outer object and turned once more upon the Self, it again becomes Ego-Libido or *Narcissistic Libido*. This narcissistic direction of the Libido to the Self corresponds to the original condition found in early childhood (*Primary Narcissism*), but when, as in Schizophrenia (the study of which has proved



of the greatest value in this connection) the Libido is withdrawn from persons and things in the outer world and redirected towards the Self (in so doing giving rise to Megalomania), we speak of *Secondary Narcissism*. The sexual activity of the Narcissistic stage of childhood is auto-erotic. Narcissism may be regarded as corresponding on the side of the Libido to what Egoism is on the side of the Ego impulses; Narcissism being thus the libidinous complement of Egoism (13); The self becoming in fact an object of libidinous desire. The recognition of this condition is of the greatest importance for the understanding of the Narcissistic neuroses (Dementia Praecox, Paranoia, Melancholia). In these diseases the Libido regresses to the Narcissistic stage, just as in the Transference neuroses (Hysteria and Obsessional Neurosis) it regresses to early objects of love or to the objects of the various partial impulses or pre-genital stages of organization. The War Neuroses (24) and the disorders called by Ferenczi (15) Patho-Neuroses likewise exhibit connections with Narcissism. A Narcissistic withdrawal of the Libido also takes place in organic disease, in sleep and in Hypochondria. Further material for the study of Narcissism is provided by the love-life. The state of being in love involves a concentration of almost the whole available Libido upon the loved object.

There are two main types of object-love: first, the *Dependence Type*, in which the object represents ultimately the mother or nurse who provides food or the father who provides protection; secondly, the *Narcissistic type* in which the object represents: (a) the lover, as he actually is, (b) as he was, (c) as he would like to be, or (d) a part of himself (*e. g.* his child). The Narcissistic type of object-love is of importance in Pathology, *e. g.* in certain forms of Melancholia, Homosexuality etc.

As a substitute for the lost Narcissism of childhood an Ego-ideal may be erected, which then becomes the object of self-love. For the sake of this ideal, everything is repressed which is not worthy of the Self. Conscience is a mechanism which is constantly engaged in observing and criticizing our actual Self and comparing it with the ideal Self; the same mechanism being responsible for the critical or abusive voices heard in Paranoia, and also for the dream censor. (15). The existence of Narcissism in childhood constitutes the strongest argument against Alfred Adler's assumption of a primary feeling of inferiority in the child. Psycho-Analysis has indeed recognised the existence and significance of the "masculine protest" but has regarded it as originating from the *Castration Complex*. This complex, which is of great importance for the development of the Self, is intimately connected with the breaking up of primary Narcissism and with the establishment of the early sexual inhibitions.

The *Castration Complex* means, for the boy, pride in his penis or anxiety about it as a result of feelings of guilt or threats of punishment; for the girl feelings of bitterness or envy together with the idea of having suffered some infantile injury or humiliation. The desire to be a boy leads to the "masculinity complex", to the tendency to imitate men (22). Many boys and girls start with the infantile theory that both sexes originally possessed a penis. The *Castration Complex*, which plays a most important rôle in the Unconscious, and therefore also in dreams, seems also to have a phylogenetic origin; it is of great significance for the development of character as well as for Neurosis.



In a new contribution to the Psychology of Love Life entitled "*The Taboo of Virginity*" (14) Freud discusses the not unusual case of frigidity (and occasional hostility) on the part of the wife at the beginning of marriage, the chief factors being found in the injury to Narcissism caused by defloration, disappointment at lack of the expected gratification at the first coitus, fixation on the father or brother, and the penis envy connected with the Castration Complex.

### Pregenital Organizations

*i. e.* organizations of the sexual life in which the genital zone has not yet assumed a predominant position (8). The *Oral or Cannibalistic* stage corresponds to the first of these organizations. The sexual aim at this stage consists in the incorporation or eating of the object (the prototype of the subsequent process of Identification) The process of *pleasure-sucking*, in which the sexual activity is dissociated from the function of nutrition and finds its gratification through the individual's own body, may be regarded as a relic of this stage.

A second pre-genital phase corresponds to the *Sadistic-Anal* Organization, in which is already contained a polarity which may be called, if not masculine and feminine, at least active and passive; the activity arising through the "impulse to mastery" connected with the forceful use of the musculature, while the anal region is chiefly connected with passivity.

The neurotic disturbances of eating which arise in connection with the Oral organization have been described by Abraham with great wealth of illustration (2) and also by Freud (11). A striking proof of the sexual nature of sucking (concerning which so much doubt has been expressed by critics) is furnished by the characteristic record of a healthy girl (17). As is well known, in Obsessional Neurosis there is a regression to the stage of Anal-Sadistic organization.

### The Development and History of the Sexual Instincts

is discussed by Freud in connection with a theoretical consideration of the nature of Instinct (9). The sexual instincts may undergo changes of the following kind: — conversion into their opposites, direction on to the Self, Repression, Sublimation. In the first of these cases there is a change from activity to passivity (*e. g.* from Sadism to Masochism or from Observationism to Exhibitionism); a reversal of content occurs only in the conversion of love into hate. In the second case there is a change of object without change in the nature of the desire, as for instance in Obsessional Neurosis, where Sadism is converted into Self-punishment. (Sympathy is not a conversion of, but a reaction against, Sadism). The fact that throughout later life the passive component of an instinct is always found to co-exist with its active complement finds expression in the general *Ambivalence* of the instincts. The conversion from active to passive and the direction of instincts on to the Self are intimately connected with the Narcissistic stage of development.



## Instinct Conversions in Anal-erotism

A certain variable portion of the energy of the Anal-erotic instinct is lost to the sexual life through Repression, Sublimation or conversion into character traits; the remainder is taken up into the new organization (10).

Faeces (Money, Gift), Child and Penis are mutually convertible terms in the Unconscious. In neurotic women the infantile desire for a penis is sometimes transformed into a desire for a child (cf. the symbol of the "little one" used in both cases), or sometimes also into the desire for a husband in favourable cases of which Narcissistic self-love will be converted into object-love, a masculine attitude into a feminine one.

In virtue of the infantile cloacal theory of birth, the child also becomes an object of anal-erotic interest. The faeces represent the first present that the child gives as a sign of love. *Defiance* is connected with postponement of the act of defaecation, which at first occurs as a means of auto-erotic gratification, later on as means of self-assertion.

The interest in faeces passes, *via* the idea of gift, to the interest in gold and money. Phantasies originally conceived in genital terms (the Penis in the Vagina) may be translated into anal terms (Penis=Faeces, Vagina=Rectum).

*Anal defiance* may be taken over into the *Castration complex* — the absence of the penis in women being taken to mean that the penis is — like faeces — removable from the body.

Jones deals very exhaustively with the subject of anal-erotic character traits (19).

Observationism, together with its inhibitions and transformations, is fully treated by Abraham (1) who describes examples of analogous phenomena from Folk Psychology. Rank (23) deals with the subject of Nakedness in Myth and Legend in connection with Observationism and Exhibitionism.

The infantile pleasure in movement and locomotion (muscle erotism) is the ultimate constitutional basis of the tendency to locomotor anxiety (including *Agora phobia*) (3).

Very early sadistic and masochistic phantasies in which "a child is beaten" are shown by Freud (12) to have their origin in the Oedipus complex, a fact which makes it probable that a similar origin could be demonstrated in the case of the other perversions. Incidentally the results are shown to be incompatible with Adler's theory of the origin of neuroses and perversions through the "masculine protest".

The "masculinity complex" of certain women originates in the Castration complex (22), though it also shows connections with infantile clitoris masturbation and with urethral erotism, as in the case of frigidity in women where the glans clitoridis has so to speak drawn away all excitability to itself. Abraham (5) finds in men who suffer from *ejaculatio praecox* that genital sensitivity is centred on the perinaeum, the penis being relatively unexcitable. This region corresponds developmentally to the *Introitus Vaginae*. The relation between *ejaculatio praecox* and female frigidity may be formulated as follows: — that erogenous zone, which (in virtue of the sex of the individual) should properly be predominant has abdicated in favour of the region corresponding to the predominant erogenous zone of the opposite sex (5).



Our views on infantile sexual investigation and sexual knowledge have been enriched by the assumption of common *human phantasies* of phylogenetic origin concerning seduction in childhood, observation of parental coitus and the threat of castration (13), the effect of the past history of human culture thus manifesting itself in the psychology of the individual child (11).

## SPECIAL PATHOLOGY AND THERAPY OF THE NEUROSES AND PSYCHOSES

by

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### A. Conversion and Anxiety Hysteria

*Stärcke* (22) demonstrates the combined action of opposite repressed impulses in the symptoms of a rare hysterical case, and discusses the relation of the symptoms to narcissism and to different erotogenic zones.

*Wulff* (27) points out that simulated symptoms in a hysterical patient of his were determined by unconscious factors similar to those in genuine cases.

*Sadger* (19) in a case of sleep-walking and "moonstruckness" traces back this condition to the longing of the son for the mother, the son having frequently observed sexual intercourse between the parents. (The moon serves as a symbol for the mother, just as the sun commonly represents the father.)

*Ferenczi* (8) describes a difference observed in two young men between higher and lower voice pitch according to the homosexual (female) or heterosexual attitude of the impulse.

*Ferenczi* (10) has noted temporary neuroses or exacerbations of existing nervous troubles which regularly took place on Sundays or holidays. He traces back the phenomenon to the cessation of the pressure of work carried out on other days. The neurotic cannot deal with the free libido which periodically accumulates and which is one of the reasons for the institution of "holidays", it becomes repressed and converted into nervous symptoms (Cyclothymia).

*Abraham* (4) supplements Ferenczi's views by alluding to the frequent cases in which those disposed to neuroses, or neurotics, can only keep well while at their daily work, this signifying to them a substitute-gratification. As soon as this activity is interrupted they are at the mercy of the neurosis.

*Eisler* (6) points out the connection between morbid blushing and onanism. He looks upon the blushing as a conversion symptom (displacement from below upwards). There originally existed with the masturbation a tendency to exhibit which was transferred from the genitals to that part of the body that is permanently uncovered.

*Abraham* (1) shows that the recognised factors, fixation on definite persons, evading of temptation, etc., do not suffice for the explanation of the anxiety relating to active and passive going about, but that one has to assume



that there is a particular sexual constitution with an abnormally strong pleasure in active and passive movement. This pleasure on account of its incestuous connections becomes repressed and then furnishes the anxiety, and during treatment the re-conversion of this into pleasure can be observed.

*Reik* (17) comes to similar conclusions, specially referring to the significance of the vibration of the genitals in passive movement.

*Abraham* (3) in his article on *ejaculatio praecox* points out that in these cases the glans penis is not the leading erotogenic zone; on the other hand the perineal portion of the urethra has an abnormally strong erotogenic significance. He shows that *ejaculatio praecox* is a partly pleasurable, partly uncomfortable flowing away of seminal fluid, and is a direct derivative of the infantile form of passing urine. The sexuality of these men has lost the active male character. *Ejaculatio praecox* is quite analogous to frigidity in the female sex. In these men the urethra and perinaeum are markedly erotogenic. They are either weak and without energy or always in a hurry and overactive. Psycho-analysis reveals in them a high degree of repressed sadism. The occurrence of *ejaculatio praecox* makes them safe for the woman; the penis has lost its power as the sadistic weapon. These patients constantly have pronounced dread of castration; fear to lose the penis is one of the factors that makes them incapable of coitus. A great part of the sexual resistances of these men is explained by their narcissism. Exhibitionistic impulses cooperate in the tendency to disappoint, degrade and soil the woman.

*Tausk* (25) thinks that Abraham has under-estimated the significance of onanism and repressed homosexuality in the aetiology of *ejaculatio praecox*, and further that the analogy between *ejaculatio praecox* and female frigidity has not been sufficiently proved.

## B. Obsessional States

*Tausk* (24) alludes to the fact that many neurotics have the compulsion to utter a single and apparently senseless word, and points out that in these compulsive words lie the remains of thought processes which had been at one time charged with reproach.

*Sadger* (18) shows that tic serves as a defence against forbidden impulses, and that it originates in repressed "muscle erotism".

*Abraham* (2) recognises in the compulsive spending of money found in many neurotics, especially in anxiety states, an equivalent to the giving out of their libido that is impossible to them along normal paths. (Regression to the anal zone).

## C. War Neuroses

*Ferenczi* (9) defines two types out of the complicated phenomenology of the war neuroses. In the one type, which corresponds with the Breuer-Freudian conversion hysteria, there is a peripheral paralysis, contracture or other local phenomena. The most important manifestation of the other is anxiety, with



which may be associated different kinds of physical symptoms. He points out the connection of the symptoms with the repressed memories of a definite situation from which they started.

*Simmel* (20) has made use of the cathartic method of Breuer and Freud as a therapeutic measure in the war neuroses, and refers to the unconscious roots of the neurotic symptoms; he reports some noteworthy cures. The author, however, expressly alludes to the great importance of psycho-analysis proper for the understanding and cure of the war neuroses.

The first volume of the *Internationale Psychoanalytische Bibliothek* (13) contains the symposium on the war neuroses held at the Congress in Budapest (1918) and also a contribution by Jones and an introduction by Freud. Freud's introduction gives some of the chief points of view for the psycho-analytical consideration of the war neuroses, calling attention to the significance of the unconscious, narcissism, etc., and expressly states that the libido theory of the neuroses is in no way refuted by the experiences of the war.

Ferenczi conclusively shows that in many respects the schools of neurology have in their conception of the war neuroses come nearer to the psycho-analytical standpoint. After a full survey of the literature on the war neuroses he gives a brief account of his own opinion on the subject. He lays stress on the increased "ego-sensitiveness" of the war neurotic and ascribes great significance to the far-going regression of their libido to narcissism. The patients conduct themselves like little, helpless children, who can do nothing by themselves, but are completely dependent on the care and attention of others.

Abraham takes up the point of view of narcissism and refers to its presence in many men before they fall ill with a war neurosis. In many such predisposed cases a psychic trauma acts harmfully when it deeply affects the narcissistic attitude of their own invulnerability and immortality. Organic traumata, by heightening self-love, tend to protect against neurosis. The relapse into narcissism is an essential cause of the loss of the capacity to follow military discipline and for the abundance of anal character traits (pension conflicts!).

Simmel attributes great value to abreaction during hypnosis, but also particularly emphasises the value of dream interpretation and makes use of hypnosis for this purpose allowing the patients to dream in his presence. He points out that hysterical attacks represent the discharge of repressed affects which could not be expressed under military discipline. With regard to his therapeutic results Simmel reports very favourably.

Jones discusses the question as to how far the experiences of the war refute or support Freud's theories. He finds in the war neuroses the motive of the flight into illness, the fulfilment of repressed wishes, etc. He also comes to the conclusion that the war neuroses are a reaction against the ego-libido, *i. e.* against narcissism.

#### D. Mental Disturbances

*Freud* (11) discusses a case which at first sight seems to contradict the theory of paranoia. The "persecutor" of the paranoiac female patient is a



man, whereas according to the theory of paranoiac projection it should be of the same sex as the patient. However, he shows that the delusion was originally directed against a female person (representative of the mother), and that it was only in the paranoia itself that the patient progressed from the woman to the man.

*Kaplan* (15) was able to observe in a young man a delusion of persecution in statu nascendi. The outbreak was the result of the paternal prohibition of heterosexual practice which drove the libido into narcissistic-homosexual paths.

*Stärcke* (21) found in the delusions of a mental patient the significance of right and left which is familiar to us from dreams. He gives the interesting explanation that left represents the more deeply repressed tendency. In his case he shows that probably before and behind (genital and anal zone) had originally the significance which is later taken over by right and left.

*Ferenczi* (7) makes some observations on latent homosexuality, repressed incest wishes, etc. in mental patients, and also some remarks on the paranoiac system formation and the connection of catatonic phenomena with sexual sensations.

*Hollós* (14) obtained useful insight into the building up of the psychosis in an acute mental disturbance. Besides the almost undisguised incest impulses the repressed pleasure in smell was remarkable.

*Landauers* (16) found in a catatonic patient a homosexual attitude towards her step-mother and a hostile attitude towards her father with whom she at the same time unconsciously identified herself. The spontaneous cure took place with the reversal of this attitude, which was rendered possible through transference of the libido on to a somewhat masculine nurse in the institution. The author discusses at length the narcissistic object-choice and identification.

*Tausk* (26) in his work on the delusions of being influenced by an apparatus furnishes a psycho-analytical contribution which deals exhaustively with the problem. The apparatus represents in the first place the genitals of the patient, just as in the dreams of machinery. However, on deeper penetration it appears that the whole body is conceived by the unconscious as a single genital organ. The author discusses the process of projection by means of which alterations in the genitals (erection, etc.) are attributed to an external influence. He relates this to narcissism. In the early narcissistic period the child cannot definitely distinguish between his own bodily impulses (desire to defaecate, etc.) and the interferences with him on the part of other persons. The schizophrenic process consists in a regression to this early stage of the development of the libido.

*Deutsch* (5) observed a mental patient who had been blind since two years of age. She became mentally affected in adult age and then had visual dreams for the first time. The author assumes that the schizophrenia regressed in the dream to deeper mental layers than is possible in normal dreams.

*Freud* (12) deals with the little investigated sphere of melancholia. He distinguishes between this melancholy and that of sorrow, with which it has many traits in common, in that the former relates to a lost object which has been withdrawn from consciousness. Freud shows that the self-accusations really refer to the love object by whom the patient has been disappointed.



The intimate relation with the object is deeply affected by this disappointment and the ego now takes the place of the object, becoming identified with it. The self-torture of the melancholic and his tendencies to suicide is comprehensible from the ambivalency of the feelings. Hate and revenge gratify themselves on his own ego. Melancholy is really a regression of the libido into the ego. The change from depression into mania still awaits explanation. However, the mania certainly contains a feeling of triumph in having overcome the loss of the object.

### E. Alcoholism

*Tausk* (23) for the understanding of alcoholic delirium of occupation refers to a form of dream occurring in neurotic persons, the dream of being busily occupied. This is similar to the delirium in that the dreamer is actively occupied with daily affairs and at the same time tormented by the anxiety of never getting ready. This dream expresses the wish for coitus, concealing the dread of impotence or other sexual inhibitions. The impulse to onanism appears in conflict with the coitus wish. The delirium of occupation serves to present the same tendencies. The alcoholic is heterosexually inhibited. He resists the homosexuality, likewise auto-erotism; his libido remains therefore at the object stage. It is of particular interest that doing tasks and work in the language of the dream, and of the unconscious in general has the meaning of sexual performance.

## PSYCHO-ANALYTIC THERAPY

by

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The contention of Jung and his followers that they have arrived at their new views through the use of the same method as that employed by Freud has misled many into speaking of Jung's school of Psycho-Analysis. The most recent work of Jung (14) brings with it a justification of the suspicion to which Jones had given expression in the Jahrbuch that "the practice of the strict rules of psycho-analytic technique has been as half-hearted as has been the acceptance of psycho-analytic theory and that in the future the abandonment of the former will follow the renunciation of the latter". This is now admitted by Jung, who uses an example of a dream analysis to explain his use of a new method. Unfortunately his "interpretation" has very little resemblance to what we are accustomed to regard as such, so that the great difference between his technique and that of Freud is not sufficiently apparent. As Maeder (17) has in the meantime also adopted a new "psychology", it would seem that we are justified in raising an energetic protest against the use of the expression: — Jung's school of Psycho-Analysis.

For Freud and his pupils there has — with one exception — been no occasion to depart from the fundamental rule of Psycho-Analytic procedure and from the technique resulting therefrom, since this procedure continues to prove the only fruitful method of penetrating into the depths of the Unconscious. Horney (18) has devoted a very useful review to this subject, in the course of which she also discusses the usual forms of Resistance and Transference. It is of course only to be expected that Freud's Introductory Lectures on Psycho-Analysis (11) should in more than one connection emphasize the great significance of this fundamental rule. Thus we find that



he refers to it in the course of his treatment of symptomatic acts, of dreams and dream interpretation, and of psycho-analytic therapy. Our critics have sometimes objected to this kind of repetition. But those who are practically acquainted with Psycho-Analysis will know from their own experience that the greatest difficulty of the work lies in the consistent application of this rule and that nothing is more important than to keep this rule in mind, especially in those moments in which our therapeutic ambitions might induce us to attempt to heal without understanding!

Kaplan's work (15) is less calculated than its title might lead us to expect to produce in the beginner a conviction that satisfactory results, both from the therapeutic and scientific points of view, can only be obtained by the consistent use of the principle of free association.

Very welcome in this respect are Freud's articles on the practical aspects of Psycho-Analysis in the course of which he repeatedly asks us to consider the aim and method of our treatment. His advice on the subject of technique deserves therefore to be given the chief place of honour in these considerations. Thus, for instance, he writes (8): — "At first, during the phase of Breuer's cathartic method, we concentrated on the factor of the symptom formation, and our efforts were therefore directed towards the reproduction of the psychic accompaniments of the traumatic situation, in order that they might then be worked off through conscious activity. Recall and abreaction constituted the end which we endeavoured to attain with the help of hypnosis. Later on, after the abandonment of hypnosis, our chief task consisted in reconstructing from the free associations of the patient the events which he refused to remember. Through the work of interpretation and the communication of the results of this work to the patient we sought to circumvent the resistance. We continued to concentrate on the situations responsible for the symptom formation and on those connected with the onset of the disease, while abreaction fell into the background and seemed to be replaced by the expenditure of energy involved in the overcoming of the resistance opposed to free association (*i. e.* in the process of following the psycho-analytic rule). Finally there has been evolved the modern technique, which represents the logical outcome of previous developments. Here the analyst refrains from concentrating upon any particular factor or problem and contents himself with the study of the surface of the patient's mind as it presents itself from moment to moment, in order to discover the resistances that may be manifesting themselves therein and to make the patient conscious of the nature of these resistances. In this way there comes about a new division of labour: the analyst discovers for the patient the nature of the (hitherto unknown) resistances; as soon as these are overcome, the patient will often supply without any further difficulty the forgotten situations and connections. The aim of these different procedures has of course remained unchanged: — from the descriptive point of view, the filling up of the gaps in the patient's memory; from the dynamic point of view, the overcoming of the resistances due to repression." In this connection Freud also says: "The patient does not remember anything of what he has repressed or forgotten, he acts it instead. He does not reproduce it as a memory but as an act; he repeats it, of course without knowing that he is doing so." It could not have been



more clearly expressed in what way we have to understand the phenomena of transference and what position we have to adopt with regard to them. The following exposition deserves also to be quoted in full in this connection: "We have said that the patient repeats instead of remembering, that he repeats under the conditions of the resistance. We may now ask the question: What is it really that he repeats or acts? The answer is, that he repeats all those aspects of his repressed mentality which have already manifested themselves openly in his life, his inhibitions, his ill-adapted attitudes towards persons or things, his pathological character traits. During treatment he repeats also all his symptoms. And now we are in a position to note that in laying emphasis on this compulsive repetition, we have not brought to light any new fact but have only succeeded in obtaining a more comprehensive point of view — a point of view which makes it clear that the patient's illness cannot come to a sudden stop at the beginning of the analysis and that we must not look upon his illness as a historical event but as an active force. Bit by bit the illness comes within our ken and within the sphere of our therapeutic influence and while the patient experiences each bit as it comes up as something real and actual, we on our part have to perform our therapeutic functions with reference to this bit — a task that consists in great part in establishing connections with the past. The calling up of memories under the influence of hypnosis conveyed the impression of an experiment in the laboratory. In the process of repetition during analytic treatment according to the new technique, we are, as it were, conjuring up a piece of real life itself . . ."

Before we go on to consider from this point of view the publications dealing with the special difficulties connected with the accurate employment of psycho-analytic technique, it will be well to deal with Ferenczi's article (5), which, as already indicated, points to an exception as regards the rigid adherence to the psycho-analytic rule. The writer describes the case of a female hysteric, who in the course of her treatment — which was several times interrupted — always arrived at a certain point and then failed to progress farther. "In the course of her constantly repeated love phantasies, which were always concerned with the person of the physician, she sometimes made the apparently casual remark that she 'had feelings down below' *i. e.* had erotic sensations in the genitals. Only after some time did I happen to notice that she kept her legs crossed during the whole hour that she was lying on the sofa. This led us — not for the first time — to the subject of onanism, which is most frequently performed in the case of women and girls by rubbing together the legs. As she had done on previous occasions, she vigorously denied ever having indulged in such practices." "I must confess . . . that some further time passed before I hit upon the idea of forbidding her to adopt this position. I explained to her that it represented a disguised form of onanism, which unostentatiously drained off the unconscious impulses, leaving only useless fragments to appear in the material of the associations. The result of this step I can only describe as *foudroyant*. The accustomed channel for draining off energy into genital paths being now closed, that patient was tormented during treatment hours by an almost intolerable restlessness of mind and body; she



was no longer able to lie still but had to be continually changing her position. Her phantasies resembled the delirium of fever in which long buried memory fragments reappeared and gradually grouped themselves around certain events of childhood and allowed one to discover the principal traumatic sources of the illness." After the writer had forbidden the patient to indulge in unconscious onanism even outside treatment hours (which enabled him to discover that the most varied symptomatic acts were used as equivalents of onanism), after he had also forbidden her to indulge a desire for frequent micturition which had then appeared, and after the patient had for a time indulged in real masturbation in order to alleviate her tension, she was eventually able to enjoy normal sexual life, of which she had before been incapable. The successful result which the writer was able to achieve with the help of his prohibition in a case in which no permanent effect would otherwise have been obtained enables him to establish the following new rule: during treatment we must keep in mind the possibility of disguised onanism or onanism equivalents, and where we notice signs of them, we must abolish them. After further discussion of disguised onanism and the difference between this and actively practised masturbation, he continues: "We owe to Freud himself the first example of "active therapy". When a similar stagnation had come about during the analysis of cases of Anxiety Hysteria, he resorted to the expedient of asking patients to put themselves in just those critical situations which were calculated to arouse their fear, not indeed in order to make the patients "get used" to the things that alarmed them, but to free the affect from its false associations. In this case we work under the assumption that the increased amount of unsatisfied free-floating affect thus produced will be directed principally to more "adequate" ideas *i. e.* those which are most naturally connected with it in the course of the development of the individual. Here also, therefore, as in our case, the procedure consists in closing certain acquired unconscious paths along which energy has been drained off and in thus bringing about a preconscious occupation and unconscious translation of the repressed material." We may here reproduce the passage from Freud's article (10) that Ferenczi has in mind: "Our technique has developed in connection with the treatment of hysteria and is still adapted in the first place to the requirements of this disorder. But we need go no further than the phobias in order to realize that as regards procedure we must make an advance beyond our previous standpoint; for we shall scarcely gain the mastery over a phobia by simply waiting until the patient is induced to give up his phobia as a result of the analysis; under these circumstances he will never bring into the analysis the material that is essential for a convincing solution of the phobia. We must proceed differently. Let us take the example of an agoraphobia. There are two degrees of this trouble, a lighter and a more severe form. Patients suffering from the lighter form always experience fear when they walk alone in the streets, but they have not for this reason given up going out alone; those suffering from the more severe form protect themselves from fear by never going out alone. With these latter we can only be successful, if we can induce them as a result of the analysis to behave like patients of the first class, *i. e.* to walk in the street and while so doing to battle with their fear. We have therefore in the first place to reduce the phobia suffi-



ciently to make this possible; only when, at the doctor's request, the patient has taken this step, will he be able to produce those associations which can bring about the solution of the phobia". From this it is clearly apparent that Ferenczi is justified in asserting that he is only following the example set by Freud.

In the case of Obsessional Neurosis also, an active therapy is suggested by Freud, who says: "There seems to me little doubt that the only correct procedure in these cases is to wait until the treatment has itself become a compulsion, and then to use this counter-compulsion as a means of forcibly suppressing the compulsion due to the disease."

In the paper to which we have already referred (8) Freud considers further the dangers to which the process of "repetition" may give rise. The analyst must aim as far as possible at actual reproduction and conscious recollection. He must prepare himself for a continuous conflict with the patient in order to retain in psychic territory all those impulses which the patient would like to drain off into motility; he may indeed regard it as a successful piece of treatment, whenever something has been worked off in memory that the patient would otherwise merely have expressed in action . . . We can best protect the patient from the harm that may result to him from the carrying out of his impulses, by pledging him not to make any definite decision that may affect his whole life (*e. g.* the choice of a career or of a permanent love-object) while he is under treatment but to postpone any such decisions until he has recovered. . . . But the principal means of controlling the patient's tendency to repetition and of converting this into a motive for remembering lies in the manipulation of the Transference. We render this tendency harmless, even useful, by allowing it to have full play within a given field. The transference is open to the patient as a tumbling ground in which he may develop in almost complete freedom and in which he is enjoined to exhibit to us all the pathological impulses that may be buried in his mind. If the patient will only show us such consideration as will cause him to respect the essential conditions of the treatment, we succeed regularly in bringing his symptoms into a new connection (*i. e.* a connection with the Transference) and in substituting for his previous neurosis a new Transference-Neurosis, which can then be cured by our therapeutic work. The transference constitutes thus an intermediate state between disease and healthy life, a state through which the patient has to travel in passing from the former condition to the latter. This new state takes on all the characteristics of the disease, but it represents an artificial disease, which is everywhere open to our attacks. It is at the same time a piece of real experience, but one that is made possible only through peculiarly favourable conditions and is provisional in nature. Well known paths lead from the "repetition" actions, as they show themselves in the Transference, to the awakening of the necessary memories — memories that appear without effort as soon as the resistance is overcome."

It seemed to the reviewer essential to give these extraordinarily important considerations *in extenso*, since they are able to explain the present position in psycho-analytical science in a way that would otherwise be impossible, and are of unusual importance for the guidance of the practical psycho-analyst.



The following sentences may serve to conclude this section of our review: (8) "As is well known, the process of overcoming the resistances is begun by the physician's discovering the resistance — which is never recognised by the patient — and then communicating it to the patient. It seems that beginners in Psycho-Analysis are inclined to regard this introductory process as constituting the whole of the work . . . We must allow the patient time to immerse himself in this resistance (of which he is now conscious), to work through it and to overcome it — by carrying on the work according to the psycho-analytic rule in spite of it. Only when they have reached the point of most intense resistance do patient and doctor through their combined work discover the repressed tendencies which are feeding the resistances — tendencies as regards the existence and strength of which the patient would otherwise have failed to be convinced. In this the physician can do nothing but await the completion of the process — a process that cannot be avoided and that cannot always be hurried. If he keeps this point of view in mind, he will often save himself from the mistake of thinking that he has failed in cases where he is really conducting the treatment on perfectly correct lines."

Abraham (1) describes a special form of neurotic resistance against the psycho-analytic technique, which consists in a refusal of the patient to follow the rule of free association, not only — as happens in every case — on certain special occasions, but throughout the whole course of the treatment. "The patients here referred to will hardly ever spontaneously admit that no associations have occurred to them. They indulge rather in a continuous, uninterrupted, logical discourse, some of them refusing even to allow their flow of words to be interrupted by any observations made by the physician. But they do not give themselves up to free association. They do not speak spontaneously, but according to a programme . . . The analyst whose eyes have not yet been opened to the form of resistance presented by these patients is apt to be deceived by their apparently willing and untiring co-operation in the analysis. Their resistance hides itself behind a false amenability." Abraham has been able to show that in all these cases there exists a process of Identification with the analyst, on the pattern of an identification with the father, and that an unusually strong development of Narcissism constitutes the ground from which the form of resistance springs. The patients manifest an unusual degree of defiance; they grudge the analyst his rôle of father, they submit themselves to him unwillingly or not at all, they think they know everything better than he does. They desire the analyst to take no part in their treatment and want to do everything alone by their own efforts. An element of envy is unmistakably present in their behaviour. Well marked sadistic-anal traits were manifested in all the cases that were treated or examined. In apparent contradiction with the well-known frugality of anal-erotics is the fact that these patients willingly make material sacrifices in order to continue the treatment, which naturally requires much time. This is to be explained by the circumstance that they enjoy making sacrifices, if only their Narcissism finds satisfaction thereby. Abraham lays great weight on an exhaustive analysis of this Narcissism, particularly in its relations to the father-complex.



Ferenczi discusses a number of ways in which the resistance of the patient may lead him to depart from a strict adherence to the psycho-analytic rule (6). There are some obsessional neurotics who, as though purposely misunderstanding the instructions of the analyst, produce *only* senseless associations. Sometimes indeed they will go a step further and will ask the analyst what they are to do if their associations do not consist of words but take the form of inarticulate sounds, melodies or the cries of animals. Sometimes the analyst may be able to extract from the senseless associations the meaning that the patient desires to hide, but in every case we may recognise the evil intention that causes the patient to behave in this way. Another way in which this "association resistance" may show itself is the familiar assertion that the patient can think of "nothing". It often happens that patients do not interpret the psycho-analytic rule literally enough. In all these cases it appears that there is something that they wish to conceal. If further explanations are of no avail, it is often best to answer the silence of the patient with a corresponding silence on the part of the analyst. Nor need we be alarmed if, as sometimes happens, the patient threatens to fall asleep during the analysis. Even if this actually happens, the sleep is as a rule of very short duration. The analyst is occasionally asked what is to happen if it suddenly occurs to the patient to carry out some *action*, e. g. to run away, to attack the analyst or to destroy something. The answer to this question is of course that the patient is instructed to *say* and not to *do* everything that occurs to him. His fear lest the thought should prove too strong for him is to be traced back to its infantile roots. In a few cases the patient may indeed resort to action of various kinds. The best technique in these circumstances is to allow the patient to fulfil his impulse; if the analyst is patient, the impulse to action is in most cases soon over. In all cases the analyst must insist that the patient must not spare himself the trouble that may be necessary before he can pronounce certain (obscene) words.

Reik (18) and Stekel (21) are also concerned with the problem of resistance, particularly in so far as it springs from feelings of a negative character. Both authors give a series of examples from psycho-analytic practice which are well calculated to impress the student with the difficulties that may be encountered in the course of psycho-analytic work. The short and somewhat sketchy paper of Stekel does not afford much help in the face of these difficulties. Reik has made an attempt to analyse the resistance into its constituents and comes to the conclusion that three principal components are at work: narcissistic tendencies, hostile tendencies (and the homosexual trends that are intimately associated therewith) and anal-erotic tendencies. It would carry us too far, were we to reproduce his views *in extenso* here.

The interesting theme of the transference on the part of the analyst towards his patient — the so called counter-transference — is discussed by Freud (9), Ferenczi (6) and Reik (18). The essential condition for the control of the counter-transference is to be found of course in the previous analysis of the analyst himself; but even those who have been subjected to a previous analysis are not so independent of peculiarities of character or



fluctuations of mood as do away with the necessity for keeping a careful watch upon the counter-transference. Only gradually does the analyst become able to avoid the dangers involved in showing too much or too little interest, in identifying the patient's interests with his own on the one hand or in treating them roughly, unsympathetically or impatiently on the other (Reik's Counter-Resistance). This ability when acquired allows the analyst to permit the free working of his own Unconscious, a procedure which makes possible an intuitive understanding of the expressions of the patient's Unconscious which are concealed beneath his manifest words and gestures. As Freud says "The technique consists simply in refraining from making any special effort to note particular facts and in devoting the same 'even flowing' attention to everything that one hears . . . . This attitude is the necessary counterpart to that which the patient is instructed to adopt, *i. e.* to say everything that occurs to him without criticism or selection. The rule as regards the analyst may be formulated thus: he should exclude all conscious influences from his attention and give himself up entirely to this 'unconscious memory', or (expressed purely from the point of view of technique) he should listen to what is said without troubling himself as to whether he is noting anything". In this connection reference should be made to what is described by Freud as "fausse reconnaissance" during psycho-analysis (7). "It happens not infrequently that the patient accompanies the communication of some memory with the words 'But I have told you about that before', although the analyst on his part feels certain that he has never before heard of the communicated fact. If the analyst then denies that he has previously been told about it, the patient will reply that he is certain that he has told it, is ready to swear that this is the case etc., the analyst's own conviction of the contrary becoming in the meantime all the stronger. It would of course be quite unpsychological to attempt to settle this difference by mere strength of assurance or violence of protestation. Such feelings of confidence in the accuracy of one's memory have, as we are well aware, no objective value, and since one of the two persons must necessarily be in error, it may just as well be the analyst as the patient who is guilty of the paramnesia. The analyst must admit this, break off the discussion and wait till a later occasion for an opportunity of settling the matter.

"In a minority of cases the analyst will then remember to have heard the communication in question and will discover at the same time the subjective, often far-fetched, motive responsible for his temporary forgetfulness. In the great majority of cases, however, it is the patient who was mistaken and who can also be brought to recognise his mistake. The explanation of this frequent occurrence seems to be that the patient has in reality had the intention of making the communication in question, that he has on one or more occasions actually made some preparatory remarks for this purpose, but has then been prevented by the resistance from carrying out his intention, and at a later date confuses the intention with the execution of what he had intended".

Further, mention should be made in this review of a work, which as regards the technique described therein, cannot properly be considered as constituting an advance; this is Simmel's treatise on War Neuroses and



Psychic Trauma (20). The treatment here used may be regarded as equivalent to the cathartic method, and, like this latter, involves the use of hypnosis. Simmel's results, however, are in complete agreement with the psycho-analytic theory of the neuroses, his little book being therefore of special interest to the psycho-analyst.

With regard to the *activity* of the physician in charge of an analysis, Freud (12) considers it an important fundamental rule that the treatment be carried out as far as possible in a state of abstinence or deprivation; premature attempts at substitute-gratification must not be permitted. So far as his relation to the analyst is concerned, the patient must be content to remain with many of his desires unfulfilled. Freud considers it probable that in the future less wealthy patients will be treated by psycho-analytic methods in special clinics established for this purpose; though the pure gold of analysis may have to be freely adulterated with the dross of suggestion, hypnosis being also resorted to in this connection.

A strict analysis, and one calculated to be of service in the advance of our theoretical knowledge, cannot however be regarded as correctly finished (14) until the amnesia which conceals the early experiences of childhood (from about the second to the fifth year of life) has been removed.

## GENERAL THEORY OF THE NEUROSES

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The third part of the Introductory Lectures on Psycho-Analysis by Freud under the title Allgemeine Neurosenlehre (15) is the most comprehensive work on the Psycho-Analytical method of dealing with the neuroses that has yet appeared. The paper on Psycho-Analysis and Psychiatry deals with the apparent contradiction conveyed in the fact that while psychiatry refers the aetiology of the psychoses almost entirely to inherited impulses and Psycho-Analysis includes and lays stress on the importance of experience, and shows



that these views are not contradictory, as might appear, but are complementary one to the other. And Freud predicts that in the near future a scientific psychiatry will not be tenable without a knowledge of the unconscious mental processes.

The significance of the symptom stands in relation to the experience of the patient and must therefore be proved historically. The task of Psycho-Analysis is therefore to find the past experiences in which the senseless idea acquires meaning and the purposeless action an aim. This holds good with "individual symptoms" but there are also "typical symptoms" in all cases that are so similar that it is not possible to refer them back to a single personal experience; the personal historical meaning is in such cases insufficient. For instance all sufferers from compulsion neuroses show the same tendencies to repetition, to perform rhythmical actions, and to isolate themselves. The same features appear in wearisome monotony in anxiety neuroses: *i. e.* fear of enclosed places, open spaces and long streets. It is remarkable that the analysis of the same hysterical symptom in different cases uncovers such a complete dissimilarity of affective experience.

We are forced to consider that the basis of the typical symptom is only to be explained in reference to an experience that is common to all men. The next lecture describes the fixation as an attachment to a definite part of the past and as incapacity to get released. This is a general and a very important feature of every neurosis; the traumatic neuroses demonstrate this nature of the fixation, sufferers from neuroses being unable to free themselves from the impulse active at the moment that the shock was experienced; it is as though they had "not finished" with the traumatic situation and were under an obligation to carry it to a conclusion. An experience is traumatic when the mind receives suddenly so violent a stimulus that a discharge or reaction is unsuccessful by the usual normal methods, the result being that the affect is stored and persists. The traumatic moment can be discovered in every neurosis by analysis. For a fixation to function neurotically, it is essential that the trauma causing the disease become "unconscious". Merely to communicate the meaning of the symptom to the patient very rarely results in a cure; the knowledge must be experienced by the patient himself during the treatment together with the affect belonging to it. Unconsciousness of the meaning of the neurotic symptom is safeguarded by amnesia (hysteria) or by the destruction of the connecting links between the retained memories (compulsion neurosis). The "whence" of the symptom disappears in the first case and remains conscious in the latter; the "wherefore" of the symptom, its tendency and the purpose that it serves, remain unconscious in both cases. The resistance of the patient to the cure is an unexpected and improbable fact which nevertheless is revealed by Psycho-Analysis. The whole purpose of analysis is to overcome this resistance. Since Hypnosis has dropped out of the psycho-analytic technique, the dynamic conception of the formation of the neurotic symptom has come to be accepted. The resistance shows a fluctuation during the cure running parallel to the fluctuation of the reaction to the emergence of new problems. This is demonstrated in the most remarkable way in the vacillation of the intellectual cooperation of the patient. We only get a clear concept of the theory of



repression when we proceed from the purely descriptive meaning of the word "unconscious" to the systematic (topical) unconscious (ubw.). An idea is "repressed" when the censor prohibits the progress from the system "unconscious" (ubw.), to the system "preconscious" (vbw.). The "censor" is identical with that power which as "resistance" attempted to hinder the progress of the cure. The neurotic symptom is a substitute for something that has been hindered by repression. This something is in every single instance, as the analysis of numberless cases shows, sexual gratification; that is to say, symptoms are disguised fulfilments of sexual impulses. All sufferers from transference neuroses, hysteria and compulsion, are ill because gratification of their sexual desires is denied them in reality. Part of the symptom acts as a defence against these sexual efforts, so that in hysteria the positive wish-fulfilling character predominates and in compulsion neurosis the negative and *ascetic*. Another part of the symptom is the compromise formation, the issue of two opposing forces; this symptom occurs frequently in hysteria, in compulsion neurosis the two parts are separated and appear in the dual action of positive and negative.

The next lecture is on human sex life and deals with the sexual theory of Freud, giving amongst other things, an explanation of the so-called perversions. Paranoia proceeds regularly from the defence against over-strong homosexual desires. All perverse desires find expression in hysteria, which endeavours to substitute other organs for the genitalia, these organs then behave as substitute genitalia, particularly the organs of nourishment and excretion.

The compulsion neurotic symptoms have for their aim a sadistic gratification, which is sometimes directed against the self (self-torture), or certain activities are over-strongly sexualised which would normally belong to the fore-pleasure (seeing, touching, peeping and particularly masturbation).

The sexual need, denied its normal path, is thrown upon abnormal ways. The importance of perversions in neuroses is easy to explain when we learn that they are only a return to infantile gratifications, the memory of which is hidden from the majority by the veil of amnesia.

The following chapter deals with the concept of sexual organisation, consolidated with that early infantile sexuality organ-erotism (auto-erotism) namely the oral and the sadistic-anal pregenital organisation, then with the processes of object finding and the Œdipus Complex of the child, this important source of the sense of guilt in the neurotic. Reference is made here to "Totem and Taboo" where Freud has enlarged upon his theory that the Œdipus Complex is not only of importance as the nuclear complex of the neurotic but that perhaps humanity as a whole drew its sense of guilt, that ultimate source of religion and morality, from the Œdipus Complex.

The infantile love-object is the prototype of the valid love-object in puberty when the release from the parents should take place. The neurotic cannot effect this release: the son remains under the authority of the father the whole of his life and cannot transfer his Libido from his mother to a strange sex-object.

The lecture that follows opens up fresh points of view on development and regression. There are two dangers that beset the path of the developing



Libido, obstruction and regression. The obstructed development is frequently only the consequence of normal organic variations in individuals which retard progress in the early stages. If a partial sexual impulse remains at an earlier stage it is termed fixation in psycho-analytical nomenclature. The second danger is that the parts that have developed further are easily turned back to one of the earlier stages; this is the danger of regression. The stronger the fixation the sooner will the function give way before outside difficulties and regress to the stage of the fixation; strong fixations also denote an enfeebled power of adaptability.

There are two kinds of regression, the reoccupation of the Libido with the first (incestuous) love-object and the return of the entire sexual organisation to an earlier stage. It is important not to confuse the concepts of regression and repression. The concept of repression is purely psychological (topical, dynamic), and independent of sexuality in principle. Regression, on the contrary, is biological and descriptive.

Among the transference neuroses hysteria shows the repression of the Libido to the primary incestuous love-object, but practically no regression to an earlier sexual organisation; the part that repression plays in this mechanism is all the more important. In other words the sexual organisation of the hysteric continues undisturbed to the full development of the genital zone, but this last function is repressed, which gives an appearance of an imperfectly developed genital organisation. In compulsion neuroses, on the contrary, the Libido regresses to the anal-sadistic organisation and at the same time regression of the love-object takes place, therefore the anal-sadistic desire is incestuous. It goes without saying that repression alone gives these desires a neurotic character; regression of Libido without repression is perversion without neurosis.

After this theoretical introduction and the definitions of concepts, Freud proceeds to unravel the problem of the aetiology of the neuroses. He refers first to the denial of gratification and remarks that this is not a cause of disease in all men, and that many ways of escape stand open for the healthy (substitute-gratification, sublimation). The amount of ungratified Libido that a man can endure has its limits; the more incomplete the normal sexual organisation is, the stronger and more numerous will the Libido fixations be on earlier organisations or love-objects, and all the sooner will the amount of ungratified Libido show evidences of a pathological condition. The fixation of the Libido represents the disposing internal factor and the denial of gratification the accidental external factor in the aetiology of the neuroses. As a third, quantitatively indefinite factor, Freud cites the adhesive quality of the Libido, *i. e.* the difficulty with which a method of gratification is given up or exchanged for another; this factor is however not specifically neurotic, it plays a large part in normality and particularly in perversions.

A further complication of the problem arises from the psychical conflict of opposing wish-impulses; without such a conflict there would be no neurosis. This conflict may, under certain circumstances, result in the formation of symptoms, which are nothing else but discredited forms of gratification returned by indirect paths in disguised forms. The psychical conflict represents the inner "denial" and only when it is associated with an outer



"refusal" does the latter become pathogenic. Freud thinks it probable that in the earlier days of man's development the inner "denial" sprang originally from outer actual impediments. The powers that occasion these refusals are the non-sexual instinctive tendencies, which Freud calls collectively the Ego-impulses, the pathogenic conflict is waged between these and the sexual impulses.

Particular emphasis is laid here on the significance that Psycho-Analysis attaches to the non-sexual tendencies in the aetiology of the neuroses, although it must be allowed that Psycho-Analysis has not been able to investigate the stages of development of the Ego so narrowly as has been done with those of Libido. The little we know of it we owe to research into the mechanism of the so-called narcissistic neuroses (paranoia, schizophrenia) except for an attempt at the reconstruction of the Ego development, which is, however, purely theoretical. Normally there exists a certain parallelism between the phases of development of the Ego and the Libido; this correspondence could be destroyed by a pathogenic force when the Ego would react with repression and fixation upon the non-corresponding organisation or Libido stage. The third factor of the aetiology of the neuroses, *i. e.* the tendency to conflict, is as dependent upon the Ego as upon the Libido.

The complete formula of the aetiology runs, therefore, as follows: the most general condition of development of neuroses is the denial which withholds the aim and love object from the Libido; the fixation collects the detached Libido into certain primitive levels; the conflict bias of the Ego development tends to draw away from these archaic tendencies so that they can only appear in disguised forms as symptoms. One can guess the "ways of symptom formation". Because of outer and inner denial the Libido meets with regression, the Ego, striving against this regression, takes away every possibility of gratification, and the Libido flows back to the fixation levels of earlier happier times. The memory traces of these primitive fixated methods of gratification belong to the unconscious system and are governed by its psychical processes (displacement, condensation): nevertheless, the opposition raised by the Ego against the expression of Libido activities continues in the unconscious as "counter-charge" and forces it to choose such expression as is compatible with the aims of the Libido and the Ego-ideal. "The symptom appears as a many-sided disguised issue of unconscious libidinous wish-fulfilment; an ingeniously selected double meaning, with two widely dissimilar interpretations." The censorship of wish-fulfilment is much more powerful in the symptom than in the dream.

The significance of childhood is twofold: on the one side we have the innate tendencies of inherited instincts and on the other the first experiences at the most impressionable age.

The factors involved are sexual constitution and infantile experience, which form, one with the other, a "complementary whole". As, however, the infantile experiences act regressively in neuroses one might come to the conclusion that at the time they held no real meaning. This is incorrect. The careful study of childhood neuroses, "the infantile neuroses", shows these experiences in full activity. Such infantile neuroses are absent in the minority of adult neurotics, they appear usually in the form of anxiety-hysteria



and either gradually merge into the "greater neurosis" or are separated from it by a period of mental health.

Symptoms are, as stated above, substitute gratifications, "they recall in some manner early infantile forms of gratification disguised by the censor during previous conflict tuned as a rule to the sensibility of the malady and mingled with elements from the inducing cause of the illness." They lose sight of the object and thereby get out of touch with reality, turning back at the same time to a form of enlarged auto-erotism, retreating to an earlier phylogenetic stage, and adapting themselves to the alteration of their own bodies in place of the alterations of the outside world, finally bringing the aims of the Libido under the sway of the displacement and condensation processes of the unconscious.

The infantile sexual experiences produced by patients under analysis are in great part phantasy; reality and phantasy are of equal value according to the neurotic standard, the psychic reality only being of worth. Some of these phantasies appear with surprising frequency, such as phantasies of witnessing parental coitus, threats of castration, or of seduction. In many cases the reality of these remembrances can, with every probability, be discredited, which fact is immaterial to the pathogenic significance of the phantasies. These primitive phantasies are phylogenetic, the imaginative child fills up the gaps of individual truth with prehistoric truth; in the primitive history of mankind these experiences (castration, witnessing coitus, and seduction) were realities. Unconscious phantasies and day-dreams are the source of the neurotic symptom as well as of the night dream. The Libido only needs to draw back the phantasy in order to find the path to the repressed fixations. The Ego is much more tolerant in phantasy than in reality and endures otherwise forbidden sexual qualities if they do not take the upper hand quantitatively.

The over-charging of the phantasy world by the quantity of Libido is termed "introversion" and is the threshold of symptom formation. A purely dynamic (qualitative) conception of the mental processes during symptom-formation is insufficient to complete the picture; it needs the introduction of the quantity of the energy, *i. e.* the economic point of view.

Regarded from the economic standpoint neurotic symptom formation is a failure, mental effort and incentive is so overpowered that the accumulated "pain" (*Unlust*) is piled up.

The difference between the neurotic and the artist is as follows: the artist is an invert but not so far as to be neurotic. He possesses the puzzling capability of moulding material so that it becomes a representation of his phantasy; thus he finds a way back to reality and to some extent at least he is saved from neurosis.

The lecture on "General Nervousness" is in opposition to the theory of Adler who holds that "nervous character" is the origin and not the result of neurosis. The behaviour of the nervous led Adler to overlook the great significance of the Libido and he judged of the circumstances as they appeared to the Ego of the patient. As the Ego is the power that represses sexuality and denies the unconscious its gratification, the issue on those points is a negative one. It is as though one installed the victorious faction as judge in a dispute. As a matter of fact we can learn nothing of the "nervous



character" from the study of the symptom formation of the Ego, but from the study of the "narcissistic" neuroses. However, the observation of cases of traumatic neuroses shows us a self-seeking Ego-motive striving after protection and gain; this motive does not induce the malady but acquiesces in it and accepts it when it has come to pass. Every non-traumatic neurotic symptom is also bound up with the Ego because it has an aspect which affords satisfaction to the repressed Ego instincts; furthermore, every symptom formation is only too convenient to egotism in that it is a pain-sparing process. These are examples of the "inner gain" for the Ego obtained from the neuroses. There are also cases in which the "flight into sickness" means the mildest form of relieving the conflict, so that even the physician shrinks from interference. However, in most cases the advantages of the so-called exterior gain from sickness are much too small when one compares them with the suffering entailed and the inherent disadvantages. At any rate a neurosis of long standing acquires a secondary functioning that strengthens its stability and presents stronger resistances to its cure.

In the following exposition we find a short summary of all that Freud has added to the elucidation of the actual-neuroses (neurasthenia, anxiety-neurosis, hypochondria). These are described as being the direct somatic results of sexual disturbances and the analogy of poisoning is suggested. It is repeatedly stated that the "system of Psycho-Analysis is in reality a superstructure that should always be traced back to its organic basis". The symptom of actual-neurosis is often the nucleus and the first stage of psycho-neurotic symptoms. The foundation of anxiety-hysteria is usually anxiety-neurosis, that of conversion-hysteria is neurasthenia, and that of paraphrenia is hypochondria.

The lecture on "Anxiety" presents a whole series of highly important explanations. Psycho-Analysis differentiates between real anxiety, which is both a rational reaction to an exterior danger and an expression of the instinct of self-preservation (flight-reflex), and neurotic anxiety that appears either with no motive or an insufficient one. On further consideration the judgement on the suitability of real anxiety must be revised. Only the motor reaction, the flight from danger, is rational; the condition of anxiety itself is inappropriate, particularly when it acts as an inhibition. The condition of anxiety is only appropriate so long as it confines itself to a single action, a signal to "be prepared"; each demonstration of anxiety is, *eo ipso*, inappropriate. This inappropriate affect is, according to Freud's view, a repetition of a significant traumatic experience phylogenetically fixed from infantile days. The birth act combines this group of unpleasurable sensations, feelings of being carried away and other physical sensations that form an effectual prototype for being in peril of one's life, and is repeated as a condition of anxiety. (In connection with this Freud refers to the significant analogy between affect and conversion hysteria. The hysterical attack is newly formed individual affect, the normal affective expression of a general hysteria, which has become an inheritance; both depend upon reminiscence.)

Neurotic anxiety takes three forms: 1. General nervous anxiety (anxious expectancy, anxiety-neurosis); 2. Phobia; 3. An attack of anxiety.

The anxious expectancy is the result of frustrated sexual excitement or a hindered sexual satisfaction and appears with the heaping up of Libido.



We learn by the analysis of hysterics that affect, hindered in its normal reaction, is converted into anxiety. "Anxiety is the common currency against which all emotional affect is, or can be, exchanged when the ideational content which belongs to it has been interdicted by repression." The symptoms of obsessional neuroses, as well as of the hysterical phobias, are instrumental in avoiding an anxiety condition that would otherwise be unavoidable. All neurotic anxiety symbolises physiological sexual emotion abnormally converted (anxiety-neurosis) or the repression of psycho-sexual emotion (anxiety-hysteria). It is very difficult to discover the relations between actual and neurotic anxiety. The idea is forcibly presented to us that in neurotic anxiety the ego attempts to flee from its Libido in a manner similar to the effort of actual anxiety to flee from external danger. While according to Adler's theory of "inferiority" a child is nervous because it brings with it at birth an enhanced degree of helpless anxiety before external danger, the libido theory of anxiety holds that these children have an innate tendency to libidinous demands to an enhanced degree or in consequence of being over-indulged possess Libido that is unrealisable and becomes converted into anxiety. In the case of phobias a very small external danger will represent demands of the Libido. In the development of anxiety it is necessary in every case that the demands of the Libido be repressed (unconscious) or unsatisfied (free-floating); Libido is never converted into anxiety so long as its claims remain in the conscious mind.

"The Libido Theory of Narcissism" stands in opposition to that of Jung who generalises the term Libido and confounds the concept with that of energy. Freud has regard to the biological duality of the essence of life and draws a strict dividing line between the ego-instincts and sexual instincts (Libido). The researches of Freud and Abraham on the psychology of Dementia Praecox and later the research of Freud on Paranoia, have made it possible to formulate an Ego psychology psycho-analytically, while the transference neuroses only allow of the opportunity to analyse the Libido psychology. It is now accepted that the later object-love has always a threshold stage, the narcissistic, when all Libido (bodily and mental) belongs to the Ego, and where the Ego is itself the object. In physical sickness and in sleep (which is only a nightly reproduction of the intra-uterine state) this narcissistic stage recurs. On falling in love, on the contrary, nearly all the transferable Libido is directed on the object so that the Ego is practically emptied of Libido. The Ego can be free of libidinous charge without losing its function of usefulness. The Ego projects its (narcissistic) Libido in order that it may not fall sick from storing it unduly. The process of withdrawing the Libido from the object into the Ego and barring the way of its return, as in hypochondria and paraphrenia, is similar to the process of repression; the fixations of which the narcissistic neuroses make use by this method of "repression" are much earlier stages of development than in hysteria or obsessional neurosis. The most obvious symptoms of Dementia Praecox symbolise the endeavour to get back to the object *i. e.* the representation of the object. The only thing they succeed in doing is to arrive at the unconscious "word" while the unconscious "thing" that belongs to it remains beyond their reach. With the narcissistic neuroses the resistance



against the healing tendencies are irresistible, because transference is either lacking or is too dangerous.

In spite of this the symptoms can be unravelled on the basis of psycho-analytical experience gained from the transference neuroses.

A short statement of the psycho-analytical theory of paranoia and melancholia closes the clinical section of this lecture which concludes with the assertion that all neurotic maladies, from the simplest actual neurosis to the most severe psychic estrangement of the individual, can be traced back to a heaping up of the libidinous factor of mental life.

The lecture on "Transference" commences with some severe criticism on "wild psycho-analysts" who erroneously identify the doctrine of "free living" and Psycho-Analysis. They forget that the pathological conflict of the neurotic takes place between two impulses that are not localised on the same (psychic) levels; a comparison between them and any connection by the aid of reason is not possible without previously bringing the repressed thoughts to consciousness; a decision on the conduct of life of a neurotic can never precede a course of psycho-analysis but follows after it and comes about during the analysis by itself without any particular advice from the doctor. The patient can then decide upon a sublimation of the impulse or upon a possible substitute gratification.

Everyone who would understand or practice Psycho-Analysis should study these lectures of Freud's with the most careful attention.

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Another work of Freud's entitled "The History of the Psycho-Analytical Movement" (16) is so enlightening that some of the points must be quoted. The question of what is Psycho-Analysis and what has no right to the name receives here a definite reply that cannot be misunderstood. "Every branch of research which acknowledges the two facts of transference and resistance and takes them as a nucleus of their work is entitled to the name of Psycho-Analysis". Regarded from this standpoint a judgement can be formed on the two dissentient movements that have developed within the ranks of Psycho-Analysis.

While Psycho-Analysis only intends to stand as an augmentation and supplement to knowledge gained by others, Alfred Adler lays claim to a complete theory of human mental life; he endeavours to explain neuroses and the character and behaviour of man under the same heading. His theory was a finished system from the first, whereas Psycho-Analysis has always explicitly disclaimed such finality for itself. Adler's theory consists of three elements of unequal value: 1. Valuable additions on the psychology of the Ego. 2. Translation of analytical facts into a new jargon. 3. Misrepresentation and perversion of the true meaning of these facts.

The good material deals with the egoistical adjunct to the libidinous instinctive impulses as they are valued by Psycho-Analysis. While, however, Psycho-Analysis has always acknowledged in principle the actuality and the significance of egoistical impulses and has taken them into individual account



whenever possible, Adler denies whenever he can all connection between the Libido and the Ego-impulses, and this to such an extent that he finally maintains that the desire to be superior is the strongest incentive to the sex act, and states that the psycho-analyst is so easily deceived as to be taken in by the deliriums of neurotics, believing their sexual phantasies to be the real thing. The Adler theory, founded entirely on the impulse of aggression, leaves no room for love. The stimulus of the personal gain from sickness that has been given its proper place in Psycho-Analysis plays the chief part in Adler's teaching on the neuroses.

Another part of his teaching is nothing else but a kind of "secondary elaboration" of pure psycho-analytical doctrines. Instead of the phrase "protective measures" he uses "security"; instead of "phantasy", "fiction". The "masculine protest" of Adler is nothing else but repression released from psychological mechanism and considered in sexual terms, in remarkable opposition to the previous assertions of asexuality. At the same time the passive and feminine impulsive activities, which certainly cannot be explained by the aggressive instinct, are disregarded, and the biological, social and psychological senses of the masculine are confounded. Then follows misrepresentation and perversion of psycho-analytical facts conveyed in conclusions which have no therapeutic value. In the light of Adler's concept, neurosis is only a side-issue of the general disease of organ inferiority, while daily observation teaches us that malformations may be accompanied by complete mental health. The unconscious plays an unimportant part with Adler. He does not refer to the system and cites the "nervous temperament" as a psychological peculiarity. The infantile impulses which are such an important part of psycho-analytical doctrine appear as the inferior feeling of the child. The mechanism of the symptom and phenomena, the basis of the many-sidedness of the symptom, receive no attention whatsoever. From all this it is clear that this form of teaching has nothing to do with Psycho-Analysis. In consequence the title Psycho-Analysis has been dropped and that of "Individual Psychology" adopted. Although radically false, the Adler doctrine is consequent, coherent and based upon a theory of instinct. Jung's modification, on the contrary, has confounded the connection of the phenomena and the instinctive life. Jung and his followers join issue with Psycho-Analysis on a fresh count. They state that in individuals the materials of sexual concepts can be changed to represent the highest religious and ethical interests; in other words, they describe special cases of sublimation. They do not say, however, that sexual impulses can be changed into asexual ones, but that these complexes contain from the start something "higher" and have an anagogic meaning; this links on easily to abstract thought-processes which are more allied to ethics and religious mysticism than to natural science. Even the *Œdipus* complex is not real but only to be considered "symbolically". The Mother stands for the "unattainable" which has to be renounced in the interests of the progress of civilisation; the Father, who is murdered in the myth, is the "internal father" from whom one must free oneself in order to gain independence. The conflict between the Ego and the Libido takes place according to Jung between the "Life Task" and "Psychic Inertia". Individual inquiry is repressed by Jung's technique: it



prescribes that as little time as possible be devoted to the past and that the chief stress be laid upon the actual conflict. This turning away from the past is an admission by Jung and his followers that the sexual representations in dreams and in neuroses are nothing but archaic methods of expression of higher thought and that they no longer carry libidinous elements.

Jung's modification appears as such a misrepresentation of Freudian doctrines that in bearing the title of Psycho-Analysis it is guilty of a kind of mimicry. The fact that Adler and Jung were for so long ardent followers of Freud and have since seceded from him, finds its explanation in analogous phenomena in analysis. Experience shows that the total rejection of analytical knowledge does not proceed only from the surface but also from every deeper level in which a particularly strong resistance is found.

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A communication of clinical psychiatry (18) gives the important fact that the development of the Libido can proceed in a normal direction even from the basis of a pathological fixation. A female paranoiac whose feelings have been aroused by her own sex, and whose hallucinatory ideas were first in connection with female persons, can seek and find the way to the male with that portion of Libido which has kept sane, namely the developed unfixated portion, so that the hallucinatory ideas would be projected on to a man. Also the so-called neurasthenic can be kept from the incestuous love-object by his unconscious ties, and take a strange woman as love-object, his sexual activities being confined to the phantasy. He can carry out his desires on the basis of phantasy and substitute a strange object for the mother or sister. The conflict between the creative instincts does not cease after the symptom that forms a compromise has been established, but continues in connection with the symptom itself. The progressive tendency tries to free the individual from the symptom, the regressive to hold fast to it. This latter tendency which Jung designates simply as "Psychic Inertia" is nothing short of what Psycho-Analysis calls a fixation: that is, the expression of instinctive practices that have been followed in earlier years and which are very hard to get free from, together with impressions and the objects contained in them which have brought the further development of this part of the instinct to a standstill.

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The most important article in Freud's series on Meta-Psychology is that on "Repression" (20). We learn from it that this process consists of two acts chronologically separated. The first condition of the repressive process is that at some time a primal repression must have occurred, that is to say, the ideational representation of an instinct must have denied the acceptance into consciousness. This results in a fixation. The second phase is repression. Properly speaking, it is an after-repression that concerns the issue of a



repressed idea that has escaped into consciousness or such thought-traces so closely associated to it that they incur the same fate with which the primarily repressed idea has met. It concerns, therefore, not only a thrusting out from consciousness but also the attractive force of the primal repression. The repressive process only nullifies the consciousness of the ideas, they continue their organising qualities and form fresh associations. If the associations are sufficiently distant from the repressed idea they can enter consciousness in spite of their connection. During psycho-analysis these connected ideas are produced by free association. Neurotic symptoms are also to be understood as issuing from the same repressed ideas but in transformed and distant guise. The repressed material heaps up a continual pressure towards consciousness which must be balanced by an equal pressure in the opposite direction, entailing an expenditure of energy the release of which constitutes an economic saving. Repression concerns the representation of an instinct, and the adherent affect will either be completely repressed or changed into anxiety. In the latter event the repression has failed. The neurotic symptom is not caused by repression but by the return of the repressed which thwarts the motive of the repression *i. e.* the avoidance of "pain". In anxiety-hysteria (Animal Phobia, for instance) the substitute formation occurs on the part of the displacement (Father-Animal), but the "pain" is first guarded against by another process of repression, an avoidance (Phobia). In conversion-hysteria the ideal content of the instinct representation is completely hidden from consciousness, the symptom consists of a purely somatic innervation, an over-strung emotion or inhibition which has drawn the entire "charge" on to itself by condensation. This process of repression puts an end to its activity; in hysteria there is no second phase as in phobia. In compulsion-neurosis the repression works as always by the withdrawal of the Libido belonging to the sadistic-anal-erotic impulses; the substitute consists of a reaction-formation, the increase of conscientiousness, that is the displacement of interest on to the opposite of what had been the aim of the Libido. This repression, however, also fails and symptoms form, social anxiety, scruples and self-reproach, in which the repressed affect returns; the rejected idea also returns in a displacement-substitute (often as a displacement on to a diminutive). Finally there is the reaction of flight by taboo and prohibition as in hysterical phobia which continues in a never-ending and purposeless cycle. The one thing that every activity of repression has in common is the warding off of ideas from consciousness which prevents the motor-activity of the impulses and the possibility of their coming into action.

Freud's treatise on the Unconscious (21) deals with the repressive processes from the topical, dynamic, and economic aspects. The question when and how affect can become unconscious is answered by Freud that this is only possible by inhibiting its discharge. All the forces at the command of repression are exhausted in causing an idea to become unconscious and in inhibiting the discharge of the affect connected with it. By the act of repression the affect is severed from the idea and both go their several ways independently; thus stands the definition of repression. Actually the affect never comes to expression until it can break through to a fresh substitute in the conscious system. For repression to take effect it is necessary



that a counter-charge is exercised by the pre-conscious which protects this system against pressure from the unconscious idea. The primal repression is nothing but counter-charge, the actual repression comes from the withdrawal of the pre-conscious charge.

In anxiety-hysteria an unconscious love-impulse strives to enter the fore-conscious; the pre-conscious charge draws back as though in flight before it; whereupon the Libido remaining in the unconscious is converted into anxiety. On the repetition of the anxiety development the fleeing charge links on to the displacement substitute which takes up the position of counter-charge. Hereafter the anxiety proceeds from the substitute idea, and develops all the stronger from that point. The further task of stemming the anxiety development falls to an outpost formed from the associated ideas of the substitute idea: this is charged with a peculiar intensity and possesses a high degree of sensitivity against excitation: the excitation of the most distant part of this outpost acts as an anxiety signal that serves to stem the pressure of the charge towards the substitute idea. In this way the idea is practically isolated from other, unconscious ideational contents. The more strongly the impulse presses from the unconscious, the larger must be the circle of anxiety signal ideas round about the substitute idea to bar the way to the phobia taboo. The substitute idea acts as counter-charge in opposition to the (repressed) unconscious idea, the phobia outpost as counter-charge to the substitute idea. This mechanism of defence projects the inner danger instinct outwards, in that the menace is changed into an external one.

In conversion-hysteria the entire impulse-charge is condensed from the unconscious into a somatic symptom that at the same time acts as counter-charge to the defence or punishment efforts of the conscious system. In compulsion neuroses the counter-charge appears most significantly in the foreground of the reaction formation.

Repression acts most successfully in hysteria, perhaps because the defence system also provides a path of discharge, while in anxiety-hysteria and compulsion neuroses the defence only consists of counter-charge which provides but small opportunity for discharge, an inferior protection against the anxiety development.

The abstraction of the conscious charge, the attempt at flight by the Ego, succeeds much better in the so-called narcissistic neuroses (dementia-praecox, paranoia) than with the transference neuroses, as the instinct-charge is completely withdrawn from the spots that represent the unconscious object-idea.

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In the "Metapsychological" Supplement to the Theory of Dreams" (22) Freud gives fresh information on that important problem, the genesis of hallucination. From the general part of his "Interpretation of Dreams" we learnt that when psychical excitation is inhibited by an interruption from that pursuing a normal course from the unconscious to the conscious, and affect is in consequence dammed up so that regression takes place, it can enter perception as counter-charge of the raw material of unconscious memory



traces; this would be hallucination. As there are, however, other methods of re-experiencing these memory-traces (as for instance recollection) Freud was obliged to take into consideration that for hallucination to come a specific interruption was necessary in the capacity for reality tests. The organ by which the test can be applied is in the conscious (perceptual) system; it holds the function of giving information as to whether a psychical stimulus comes from within (*i. e.* from the psychical memory system) or from without (from perception). Our whole relationship with the outside world depends upon this capacity. Hallucination therefore consists of a charge from the conscious system (perception) not as normally from the outside world but from the inside, in that it escapes the reality test by regression. For a reality test the conscious system must arrange for a motor innervation from which a signal will be received as to whether the stimulus can be actively avoided (outside stimulus) or not (inside stimulus). In hallucinatory wish-psychoses the Ego breaks off all connection with painful reality; thereby a path is opened up for the wish-phantasy away from any reality test. In hallucinatory psychosis, in Dementia-Praecox, the Ego of the patient is so split up that no reality test can hinder the hallucinations. Hallucination in the latter psychosis is a secondary symptom and usually appears later when the Libido endeavours to reach the memory-traces of the object by means of counter-charge. The verbigeration of Schizophrenia (charge of the residue of word-memories) and the projection symptoms of paranoia (persecutory delusions) are similar "restitution efforts" in the service of the tendency to dissociation. Even in the latter case it is a question of an interruption of the reality test: the paranoiac strives to project on to the outer world the internal stimulus that has become intolerable to him. Finally a glance is thrown at the significance that the subject of the "organ of repression" has for our view into the mechanism of psychical disturbances. In the dream the withdrawal of the charge (Libido) touches all systems equally, in the transference neuroses the pre-conscious charge is withdrawn, in Schizophrenia that of the unconscious, in Amentia that of consciousness.

Freud's article on "Depression and Melancholia" (23) brings to a close the series of his metapsychological essays. We learn that the disposition to melancholia predominates in the narcissistic type of love-object, and that the refusal of food that is a characteristic of the complaint can be traced back to a regression to the oral stage of the Libido. The self-reproaches of the melancholic are in reality reproaches against persons with whom the patient has identified himself. The (undoubtedly) pleasurable self-torture in melancholia is a gratification of sadistic and hate impulses against an object, but these by inversion get directed against the person of the patient.

This sadism furnishes us with an answer to that most difficult psychopathological riddle, the suicidal tendency. We have long known that suicidal impulses are reversed murder impulses. The analyses of melancholia teach us that the Ego only desires to kill itself when it takes itself as object by reason of the return of the object-charge. The Ego is completely overcome by the object in suicide and in falling in love, though in quite different ways. The Ego is completely emptied of Libido by the process and the perception of the self in this condition explains the delusions of poverty of the melancholic.



The closing chapters discuss the psycho-analysis of Cyklothymia and Mania in particular, and should be read in the original.

Freud's "One of the Difficulties of Psycho-Analysis" (25) puts before us a psychological explanation of the opposition that meets psycho-analytical doctrine on every side (See Vol. I, p. 17 of this Journal).

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The following notes have been gathered from Freud's work "The History of an Infantile Neurosis" (26).

The analyses of children's neuroses command a special theoretical interest. They furnish proof of the uselessness of superficial interpretation of analytical material. The analysis of children shows "in flagrante" the enormous part that libidinous impulses play in the formation of neuroses, and demonstrates the absence of the aims of civilisation of which the child knows nothing and which therefore can have no significance for him. The profound analysis of the case detailed in this paper proves that a child at the tender age of one and a half years is actually in a condition to receive an impression of such a complicated process as the observation of parental coitus, to preserve the impression faithfully in the unconscious, and to reproduce the material (as in this case) in the fourth year, and it also proves that Psycho-Analysis is a procedure by means of which it is possible to bring the details of such a scene to consciousness in a consecutive and convincing manner decades after the actual occurrence. An analysis such as the preceding one is an eloquent argument against undervaluing the impressions of infancy. The case is fresh proof how necessary it is to uncover all unconscious thought processes in the course of an analysis without any regard as to whether they are phantasies or memories of actual experiences.

A "curtailed procedure" would have missed the necessary connecting links and in consequence the correct understanding of the case. Scenes from such early days are not as a rule reproduced as memories but must be reconstructed step by step from associations. The opposers of Psycho-Analysis maintain that these reconstructions are formed by the analyst and forced upon the patient. No decisions can be arrived at on this point so long as these opponents refuse to form these reconstructions themselves strictly after Freud's methods. Jung places the actual conflict in the foreground at the expense of the infantile, Freud maintains on the contrary that the influences from childhood make themselves felt in the very earliest stages in neuroses in that they determine whether and at what point the individual fails to face the real problems of life.

The fact that a child can develop a neurotic condition in the fourth or fifth year is a proof that infantile experiences are able alone to produce a neurosis and one finds the cause rests with primitive instincts and not with higher ideals.

The "primitive scenes" reconstructed in analysis (observation of parental coitus, castration threats, seduction) may be either actual experiences or phylogenetic inheritance. The child reaches after phylogenetic experience where his individual experience fails; it is, however, wrong to attempt a phylogenetic explanation before one has exhausted the ontogenetic material



(Jung has fallen into this error). The inherited phylogenetic systems, like the philosophical "categories", provide for the disposal of life impressions. Freud advances the theory that they are "precipitates" of the history of human civilisation. The system can, however, rise superior to individual experience and take its place. An instinctive knowledge, a presage of approaching experience corresponding to animal instinct, operates in reaction to the earliest sexual impressions. This instinctive knowledge would be the nucleus of the unconscious, a primitive mental activity that would be overshadowed by human reasoning powers but retaining the power to draw higher mental processes down to its own level. Repression would be the return to this instinctive level and man pays for his progress with the liability to neurosis, giving evidence of the existence of the earlier stage by the very possibility of it. The significance of the early dreams of childhood lies in the fact that they furnish material for the unconscious that protects it from being absorbed by the later developments.

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Freud's work "A Child is being Beaten" (27) gives his views on the origin of sexual perversions. After a searching enquiry into the rise of masochistic perversion from the *Œdipus* complex, he takes the opportunity to restate that the motive of repression must not be sexualised as Adler asserts in his "Masculine Protest".

"The nucleus of the unconscious mind is formed by the archaic inheritance of man and whatever is unserviceable to the furtherance of later phases of development or is incompatible with, and would injuriously hinder, progress falls under the processes of repression.

"This selection is more successful in one group of impulses than with others. It is in the power of the latter, the sexual impulses, by virtue of particular conditions to frustrate the intentions of the repression and to enforce its subjugation by disturbing substitute-formations. Therefore infantile sexuality underlying repression is the chief impulsive force of symptom-formation and the essential part of its content is the *Œdipus* complex, the nuclear complex of neuroses."

Freud maintains that the sexual aberrations of childhood, as well as those of adult life, branch off from the masculine complex.

In these sentences we find the most important of Freud's discoveries of the last few years.

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Abraham's enquiry into the earliest pregenital stages of the development of the Libido (1) casts a cursory glance at the Freudian pregenital organisation and then concentrates upon the study of the cannibalistic impulses in Schizophrenia. In this illness the oral zone is of greater significance than any other erotogenic zone. The sexual function and the taking of nourishment are closely associated in the act of sucking, the desire for incorporation stands in conjunction with the sex-object. Then follows a general



characterisation of similar appetites in normal persons and in neurotics; attacks of ravenous appetite are often the expression of libidinous impulses. In many of these cases a persistent desire to suck obtains a strong influence in adult life, it reacts upon the behaviour and interferes with the other functions of the oral zone (eating and speaking). All neurotics suffer from ill-humour when they have to renounce an accustomed gratification of the oral zone and on the other hand their ill-humour is dispelled by a pleasurable oral gratification. Ill-humoured or excited neurotics are favourably influenced by the mere swallowing of some neutral medicine. The suggestive action of a medicine bottle lies in the fact that the unconscious returns in the act to the earliest source of gratification. This is also the explanation why neurotics are so happily occupied with their diet and the art of taking food. The regression to the earliest stage of sexual organisation shows us the meaning of the refusal to eat and the fear of starvation of so many mental patients. Traces of this regression are also apparent in normal persons in declining years. In melancholia an unconscious sadistic wish is dominant in annihilating the love-object by devouring it. The severe self-reproach of the melancholic is in part due to this impulse. The so-called "lycanthropic" delusions which have for content the devouring of human beings, are yet clearer examples.

The same impulses are represented in the insane in a negative form, *i. e.* the refusal of all food. The fear of starvation is the result of repression when the cannibalistic desire is converted into fear. Accounts of "dismemberment" in the sagas and the mythological accounts of the god who devoured his own children are psychological folk-lore parallels to the cannibalistic period of the individual to which, as we see, the neurotic so easily reverts.

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Abraham's article on "Neurotic Exogamy" (2) deals with the fact that many neurotics, obeying an inner urge, incline towards persons of another race. This inner urge has the same effect on these individuals as the open law of primitive people. The ethnological law and the neuro-psychological fact have a common basis in the dread of incest.

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V. Tausk (a pupil of Freud whose valuable work has been cut short by an unfortunately premature death) draws our attention to the economy of the Psychical Processes (58). The overcoming of resistance in the course of a psycho-analytical cure is due to a relative depreciation in the value of the motive. The gain in psychical adaptability is the reward for overcoming resistance. The "pain" which would make for resistance becomes a means of profit to pleasure. The capacity of ideas for entering consciousness is decided according to their quality for pleasure or "pain" consequent upon the psychical development of the individual. According to Tausk a series of



pleasurable thoughts springs up immediately before the reproduction of an erotogenic conception which recompences the subject for the depreciation of the consciousness of self. This recompense reduces the value of the repression motive.

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A. van der Chijs' work on "Hallucination and Psycho-Analysis" (5) describes a case of paraphrenic hallucination that was considerably benefitted by a course of analysis, corroborating Freud's views on the subject, and it presents a theory on the modern expressionistic school of art and the psycho-analytical doctrine of neurosis and psychosis. These phenomena in the world of art, the increasing comprehension of the public, and the displacement of the old moral ideas ("not unconnected with the discoveries and teaching of Freud") are to a certain extent pathological excess and partly perhaps the "normal development" of the human mind. In consequence of this displacement the boundaries between sane and neurotic must be shifted towards the pathological.

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Leo Kaplan's book "Psychological Problems" (39) is a collection of important papers on general psychology in the light of Psycho-Analysis. "Repression and Psychical Polarity" connects the idea of ambivalency with that as expressed by Pikler—that no representation is thinkable without the simultaneous presence of its opposite and that it can only be represented by the abstraction of its opposite.

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We are indebted to Groddeck (29) for the first courageous endeavour to make use of Freudian teaching in organic medicine. The compiler suggests that purely organic maladies such as inflammation, tumours etc. are somatic reactions to psychical conflicts. However unexpected and improbable such suggestions may sound, they should not be cast aside "a priori": no one who is convinced of the reciprocal interaction of the psychical and the physiological in psycho-analysis will consider them as impossible, though certainly such assurances require further and more convincing proof than is given here.

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Ortway in a small pamphlet (51) draws attention to the remarkable resemblance between the laws of inheritance according to Mendel and the Freudian mechanism of repression. The suppression of an inherited characteristic (recession) is analogous to repression. In both cases a characteristic is reduced to a latent condition and if it gains expression at all it is only in minor traits of character. Instead of "dominant" and "recessive" one could use the term "compromise formation": the latent disposition can overpower the dominant one (analogous with psychosis). It appears as though inherited entities stood in the same relation to each other as complexes do with their



attendant affect. The author believes that when repression and psychical conflict is met with, one may presume a conflict between inherited entities. He invites the co-operation of psycho-analysts on the problems of inheritance. The psychical character traits are to be regarded as belonging to the inherited entities.

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Eitingon (7) points out in some detail that Jung has mistaken a biological ethical philosophy for psychology.

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Dr. Weissfeld (60) also blames Jung for confusing biology and psychology, while Freud insists upon a distinct differentiation. Weissfeld occupies himself with the boundary line between affect and vegetative phenomena. Jung, instead of explaining the irrefutable fact of the metamorphosis of affect, evades the question; his "Libido" or "Will" is not sufficiently powerful to justify the transformation. The author substitutes the principles of his theory of affect metamorphosis.

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Adolf F. Meyer (47) presents the best criticism that has yet appeared on the errors of Jung's school, which is all the more noteworthy as previous to the latest publication of Jung Meyer could distinguish no essential difference between the opinions of the former and Freud. Meyer now writes of Jung that he lacks insight into the idea of repression and has a confused misconception of the unconscious, while he lacks perception for the dynamic and economic relations.

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Professor Janet (Paris) delivered an address before the International Congress in London criticising Psycho-Analysis. Ernest Jones (33) points out that Janet's errors and misrepresentations are due partly to a lack of knowledge of the subject and partly to resistance.

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At the end of the review comes a summary of the works of the writer (Dr. Ferenczi).

After relating the history of the illness of a young man who became a paranoidal dement after a surgical castration, the writer asks the question whether a narcissistic neurosis can be traumatically induced and replies in the affirmative. Physical disease or an injury can cause a traumatic regression to narcissism, *i. e.* induce a narcissistic neurosis. These are the "patho-neuroses" (12). Another part of the body can take on the qualities of the genitalia in consequence of the original stimulus being displaced by illness. This theory is supported by observations on diseased organs. There occurs not only a pleasurable excitability in the diseased organ, but it also monopolises the entire interest and Libido of the subject. The



erotogenic zones are the most susceptible in this respect, but no part of the body is entirely free of erotogenic qualities and the possibility of pathoneurotic disease lies everywhere. Among these zones the skin, the mouth, the anus and the genitalia are severally considered in this connection, particularly the latter. Puerperal psychosis, for instance, is the result of patho-neurotic disturbances caused by genital trauma in the act of giving birth; in consequence of a pathological increase the Libido is partly transferred from the genitalia on to the child (in the same manner from the bowels on to their contents). The impulse in insane persons to castrate themselves is a brutal attempt to rid the ego from a local heaping-up of Libido. It is possible that this increase of libido plays a useful part in organic healing processes. The problem of masochism cannot be unravelled without the help of patho-neurotic "pleasure-pain". From this idea we also gain some light on the female (passive) sex-aim and genital system. The physical injury in defloration which was in the origin painful, acquires a secondary characteristic of pleasure in consequence of the patho-neurotic increase of Libido, the injury results in a transference of "erotogenicity" from the clitoris to the vagina, on to the instrument that has caused the wound and on to the wielder of the weapon.

"Materialisation Phenomena" is the term applied by the writer of the Review to those psycho-physical conditions when a wish is plastically represented as though by magic from the disposable materials in the body. These conditions are the foundations of conversion hysteria and indicate a regression to the "proto-psyche", the reflex stage of psychical phenomena. The stimulating power of the materialisation emanates in hysteria from genital sexuality. The normal differentiation of the functioning of the actual organ and the prime erotic organs (genitalia) is in abeyance in hysteria and in consequence of this confusion hysterics are liable to "multi-rendering", to jump from the psychical into the physical, revealing a part of the organic foundations upon which symbolism is built up in the mind. The hysterical symptom is a "heterotype genital function". The materialisation phenomena also throw a light on the physiological correlate to artistic talent.

The writer mentions that in one of the first attempts at "Active Technique" (14) in Psycho-Analysis he almost succeeded in experimentally reuniting released affect to its historical symbol. For instance, the barring of unconscious reaction-paths of stimulation often succeeds in breaking down resistance by means of the increased pressure of energy. This form of experimental psychology is well qualified to convince us of the stability of the Freudian doctrine of the neuroses.

One sentence from the article on "Hysterical Hypochondria" may be quoted: "It seems as though the same heaping-up of Libido in an organ could result in either a purely hypochondriacal, or else in a conversion-hysterical, superstructure according to the sexual constitution of the patient."

The writer came to the conclusion, on the basis of the analysis of a transitory conversion symptom, that the explanation of every psychogenic physical symptom and every conversion phenomenon demanded the acceptance of a "tertium comparationis" between the above mentioned psychical and physical processes, possessing the identity of a subtle mechanism.



## CHILD PSYCHOLOGY AND EDUCATION

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41. Tagebuch eines halbwüchsigen Mädchens. Quellschriften zur seelischen Entwicklung. Nr. 1, 1919.
42. Smaller contributions may further be found in the *Mitteilungen der Zeitschrift für ärztl. Ps.-A.*, Bd. II, 1914: *Blüher, H.*, Der sogenannte natürliche Beschäftigungstrieb, S. 29; *Ferenczi, S.*, Zur Ontogenese des Geldinteresses, S. 507; *Spielrein, S.*, Tier-symbolik und Phobie bei einem Knaben, S. 375; — B. III, 1915: *Friedjung, J. K.*, Typische Eifersucht auf jüngere Geschwister und Ähnliches, S. 154; *Weiß, Ed.*, Beobachtungen infantiler Sexualäußerungen, S. 106; — B. IV, 1916: *Abraham, K.*, Einige Belege zur Gefühlseinstellung weiblicher Kinder gegenüber den Eltern, S. 154; *Ferenczi, S.*, Symmetr. Berührungszwang, S. 266; *Reik, Th.*, Aus dem Seelenleben eines zweijährigen Knaben, S. 329; — im Abschnitte "*Aus dem infantilen Seelenleben*": *Zeit*, Bd. V, 1919; *von B. . . .*, Zur infantilen Sexualität, S. 115; *Ibid.*, Zur Idiosynkrasie gegen Speisen, S. 117; *Deutsch, H.*, Der erste Liebeskummer eines zweijährigen Knaben, S. 111; *Frozt*, Aus dem Kinderleben, S. 109; *Ferenczi, S.*, Ekel vor dem Frühstück, S. 117; *Hitschmann, E.*, Über einen sporadischen Rückfall ins Bettnässe bei einem vierjährigen Kinde, S. 115; *v. Raalte, Fr.*, Äußerungen von Sexualität bei Kindern, S. 103; — im Abschnitte "*Beiträge zur Traumdeutung*": *Zeit*, II, 1914: *Spielrein, S.*, Zwei Mensträume, S. 32.

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Unperturbed by the cries of indignation and warning raised continually, since the appearance of Freud's Analysis of "Little Hans" and "From the Psychic Life of a Child" (Hug-Hellmuth), by the opponents of the Freudian school who believe that Psycho-Analysis is dangerous to children and robs them of their innocence, psycho-analytic science has continued its investigation of the subject of child psychology and has estimated the value for education of the knowledge acquired in this field.

From the analysis of the grown person we reap important facts as to the psychic occurrences of childhood and their results in later life; the immediate observation of children makes possible not only the corroboration of these revealed facts, but also an insight into the mechanism of the psychic phenomena of infancy and youth, into the preparation and the incidence of neuroses in infancy and into the development of character as dependent upon experience. Finally, the criticism of the personal writings of other than psycho-analytic authors, such as memories of childhood, the voluntary confessions of poets, diaries and letters of young people and mothers' daily memoranda of the spiritual development of their children, affords a valuable addition to the methods of research already specified.

Foremost in the first group are the works of Freud (10, 11) in which is once more set forth the rôle of sexuality in children and (10) the oral phase shown to be the earliest stage in the development of the Libido; next we



would place Abraham's invaluable investigation (2) of the pregenital stage of the development of the Libido, (1) of the way in which they appear in the analysis of adults and how the observation of children confirms their existence. Abraham draws thence important conclusions as to the origin of certain symptoms of neurosis, of nervous craving for food, refusal of food, especially milk, or a morbid desire for only liquid nourishment or sweet stuff. The equation "food-loving" Abraham traces through the analysis of a case of dementia praecox to the deepest roots of the oral or cannibalistic phase of the infantile Libido.

Of the greatest significance for the understanding of the incidence of perversions, and especially of masochism, is Freud's investigation in "A Child is Being Beaten" (4). He reveals there three forms of neurotic phantasy: the earliest "father beats a child" he describes as "not masochistic", for the phantasy-maker is not the whipped child but one who is hated by him; the second phantasy, which, unlike the first, and the third as represented in the title of the treatise, is never remembered and therefore remains unconscious and to be reconstructed by analysis, is pronouncedly masochistic, for it runs: "Father beats me"; the third has the generalised indefinite form a "child is beaten", and brings with it strong sexual excitement, leading, at its height, to genital onanism; it is apparently sadistic. At the base of these phantasies lie the early incestuous choice of objects, their displacement and the feeling of guilt whose origin is unknown. In his explanation of the genesis of perversions, of masochism in particular, and in his substantiation of the part played in the dynamics of neurosis by the differentiation of the sexes, Freud makes use of his observation of six cases. In his opinion, the relationship between perversions and the Ædipus complex is that the latter, in breaking down, leaves perversion the sole inheritor of the libidinous attraction and the sense of guilt that accompanies it. He suggests "that the sexual aberrations of children, as well as those of adults, derive from the same complex", which may be described as the root-complex of neurosis.

Of equally fundamental significance is the essay "From the History of an Infantile Neurosis" (13). In this work, Freud has undertaken an investigation "which carries research into earlier phases and into deeper strata of the psychic life than any previous attempt has done". The results are extraordinarily valuable, not only for the building up of neurological science, and for the convincing demonstration of the agreement between psycho-analytic and biological findings, but also for educational purposes. The lasting effects of the earliest impressions of childhood, the primordial scenes, whether actually experienced or only imagined, are here indicated in a concrete case, illustrating the way in which the neuroses of the adult are built up from those of the infant; how the food irregularities of children have, amongst other causes, a psychic cause; the significance to be attached to the child's relapse from "naughtiness" to anxiety and what is to be looked for behind the religious broodings and pious ceremonials of children. To recognise the difference between consciousness and the unconscious of children and of adults is, to my mind, of the greatest importance for the curative educational psycho-analysis; for the perception of this difference is one of the factors which demands that analytic technique for children and for adults shall not



be quite identical. In setting forth the problem, which forms the conclusion of this classic, Freud offers the hypothesis of the "given schemata" and "a species of knowledge, difficult to define, that operates in children as a preparation for understanding", and that is comparable to "the instinctive knowledge of animals". "This instinctive knowledge", which naturally includes the sexual, "is the core of the Unconscious, a primitive psychic activity which . . . perhaps has, in everyone, the power of drawing to itself higher psychic processes." Upon this assumption Freud founds his belief in repression as a return to this instinctive stage; "thus man pays for his new and great acquisitions by his susceptibility to neurosis, and by the very possibility of neurosis witnesses to the existence of earlier instinctive stages." The dreams of early childhood may thus be described as "bringing, to the Unconscious, material which protects it from being wasted by subsequent development."

A work which is an excellent condensation and summary of the knowledge acquired in the field of psycho-analytic investigation of children, comes from the hand of our lately deceased colleague Professor Putnam (38). Towards the circulation of our findings in other than psycho-analytic journals, there are articles by Dietrich (9), Friedjung (15, 16, 17, 18, 19, 20, 42), Häberlin (21, 23), Hug-Hellmuth (27), Pfister (35), and Sadger (39, 40). Sadger, in his article on "Unloved Children", discusses the influence on the later development of the individual of the lack of affection in early years and comes to the same conclusion as that expressed by the present writer in 1913, namely: that the unloved child, because it has never been taught to love, has in later years the greatest difficulty in finding itself.

An outstanding contribution to the subject of the connection between character and infantile sexuality is that of Hattingberg (24, 25), tracing the relationship between anal-erotism and obstinacy; he infers from his observations that childish obstinacy springs from the enjoyment of fear, and from this causative connection he extracts noteworthy educational conclusions.

The works of Marcinowski (30) and Blüher (7) are also concerned with the enormous significance of the experiences and the suspensions of feeling which in early childhood "make impressions so powerful that they are decisive for the remainder of life and form the totality of the individual character, in which is included his sexual character."

Of singular interest are the works of Bernfeld (5, 6). Whilst in his short essay "On the Psychology of the Unmusical" in which he explains the apparent lack of musical endowment by strong "feeling-motives" he frankly admits his continued attitude of suspension towards Psycho-Analysis in the statement "here the psycho-analyst would speak of death-wishes towards the sister, but we will be more cautious"; at the same time, in his treatise on "Psycho-Analysis in the Movement for Educational Reform" he stands quite unmistakably on psycho-analytical ground. This treatise is an attempt to scatter the prejudices of those educationalists who consider that the spiritual and ethical in youth can, through the medium of Psycho-Analysis, be rendered "unspiritual" and "unethical", that a section of our youth repudiates Psycho-Analysis "from motives of self-preservation against dangerous



knowledge", another is under the sway of a form of "Spiritualisation" now so frequently to be met, and that a third, the group about Blüher, bases its philosophy of life, and its conduct, upon the existence, so clearly defined by Psycho-Analysis, of homosexuality, and in "Men Associations, that is of Youth concentrated on Manhood" find the satisfaction of their erotic instincts; a tendency for which Psycho-Analysis is not responsible.

The two important essays of Pfeifer (33), and Pfister (34) treat of the significance for maturity of the games of childhood. Pfeifer analyses certain games of "catch" and traces in them the part played by infantile erotic impulses: sado-masochistic desires, anal-erotic interests, uterine and birth phantasies and the desire for omnipotence are all realised in the game; Pfeifer sees in the reproduction of the play period by certain games of hide-and-seek a reversal of the power of the father over the child, a displacement, as it were, of the incest-desire. The products of the repression of infantile and erotic impulses and of their objects seem to him to determine the character of the game. According to him the originating cause and the form of the game lie in a striving of the suppressed sexual impulses towards activity and satisfaction. He concludes with a discussion, from the psycho-analytic standpoint, of the game theories of Spencer-Schiller and of Groos.

Pfister demonstrates in an analysis as pastor the way in which the child's inclination to games may yield valuable indications of his psychic development, in betraying the existence of unhealthy tendencies, and how, through careful supervision, he may be protected from many future psychic injuries.

To these two essays may be added Blüher's little sketch (42) on the subject of "The So-Called Natural Impulse towards Activity", though its source is not analysis, but the immediate observation of children. We meet therein the fact, so well-known to analysts, though still denied by the laity, that the motive forces in the games of children are very frequently grossly sexual, and tend to derive especially from anal-erotic interests, which the unrestrained child expresses, without shame, in words.

Lou Andreas-Salomé illuminates with poetic power the obscure relationships between the sexual curiosity of children, anal-erotism and the veto that suppresses them (2). She endeavours (3), plunging deeply into the memories of her own childhood, to explain the development of feminine types by the infantile erotic focus upon the father, and the Ego-cult of small children by the indestructible first impressions of childhood.

Andreas-Salomé's writings (2—4) with their rich material, drawn from the writer's personal memories and from her observations of other children form, as it were, a connecting link between the theoretical studies of authors who draw upon their psycho-analytic practice upon adults and those which are the results of direct observation of the child's mind.

In this last connection there are a considerable number of smaller contributions: on the emotional focus of the child upon its father and mother [Abraham (42), Deutsch (42), Hug-Hellmuth (26), Reik (26)], upon its brothers and sisters [Friedjung (42)], the childish idea of God [Eitingon (26), Reik (26)], upon infantile sexual expression [v. Raalte (42), Spielrein (42), Weiss (42), Frost (42), Blüher (42)], the animal symbolism and phobias of children [Spielrein (42)]. The psycho-analytic interpretation by Freud (13) of



one of Goethe's childhood memories is supported by some illustrations from child-life [Hug-Hellmuth (13)]. Reik (26) treats the subject of the development of word meanings amongst children. Abraham (26) deals with the emotional values which help to form the words of children. Hitschmann (42) and Ferenczi (42) supply interesting contributions on the subject of childish anal and urethral eroticism, and on the more or less difficult accommodation of children to the demands of civilisation and their occasional relapses into early infantile phases. The children's letters supplied by Hug-Hellmuth (26) afford us a clear glimpse into the centres of interest of developing youth, so well-concealed from the adult. On the subject of the dream-life of children there is only Spielrein's single communication (42). A valuable contribution to the study of children who are difficult to educate comes from Lazar (28), the director of the Department of Curative Education of the Vienna Children's Clinic. The work is a fine testimonial to the fact that even those scientists who stand far apart from psycho-analytic circles, cannot, if they are honest, escape the influence of Psycho-Analysis.

The most valuable document on the subject of psychic development is the recently published "Young Girl's Diary" (41), the record first of a child and then of a girl at the beginnings of maturity. It gives us, as nothing before had done, a clear vision of the joy and sorrow and of the innocent guilt-laden desires of a half-fledged soul. The hate and love-filled relationships to the brothers and sisters, the already libidinous sentiment towards the father, the characteristic wavering, in the period preceding puberty, in the choice between one and the other sex, the shuddering of fear and desire at the first contact with sensual reality, the profound effect of the illness and death of the beloved mother, the self-reproach and the religious doubts which arise thence in the young soul—all these experiences are set down so naively and palpably that the diary affords to those parents and teachers who are aware of the greatness of their task and to all psychologists, a rich source of incitement to plumb the depths of the problem of the developing soul. From no educational library should this book be missing.

Side by side with this "practical pedagogy" from the hand of a child, we may place the excellent contributions to the subject of education published by the Swiss analysts during the last few years. Foremost among these are Pfister's "Imperilled Children" (37) and "What Psycho-Analysis Offers to the Teacher" (36). His activities as pastor bring within his reach an extraordinarily rich material, the possession of which both justifies him in giving, and pledges him assiduously to give, advice in the matter of education that is based upon psycho-analytic foundations. But there is one remonstrance, already voiced by me elsewhere and that I cannot here withhold. To whatever extent his father-authority as spiritual advisor may facilitate his psycho-analytic work, he is not well-advised in giving such excessive prominence to the ease and rapidity with which, in so many cases, his sufferers have been cured. Every practising analyst knows how protractedly laborious and wearisome are both medical and curative-educational analyses. In my opinion Pfister prejudices both himself and the method by continued pronouncements upon this so variable factor. Mensendieck in his essay (31) makes some useful suggestions as to the arrangement of the school-life of



young people during the course of psycho-analytic treatment with a view to its adaptation thereto. The re-education of the pupil in the fulfilment of duty and in the duty of obedience, and the self-knowledge of the teacher are, in Mensendieck's opinion, together with the harmonious cooperation of the analyst and the teacher, of prime importance for the success of the treatment.

The third group of essays on child psychology deals with the psycho-analytic value of poetical writings and of autobiographies, voluntary confessions, short stories and novels, in so far as they treat of the development of the youthful soul. We may learn how authors such as, for instance, Dumas and W. Humboldt, whose writings date from past decades, even from past centuries, intuitively perceived the interdependency of psychic processes with which psycho-analytic science has made us familiar.

It does not surprise either Reik (26), Sachs (26) or myself to find in the work of certain contemporary authors, for example, in that of Lou Andreas-Salomé, Meta Schoepp, Geijerstam and Anatole France, the conscious or unconscious influence of psycho-analytic modes of thought [Hug-Hellmuth (26), Hárnik (26)].



## BOOK REVIEWS

THE ELEMENTS OF PRACTICAL PSYCHO-ANALYSIS. By Paul Bousfield, M.R.C.S. (Eng.), L.R.C.P. (Lond.), (Kegan Paul, Trench, Trubner & Co. Ltd., London, 1920. Pp. 272. Price 10s. 6d.).

This book purports to be a presentation of psycho-analysis for the instruction of practitioners and students. We have therefore to examine the author's qualifications for teaching the subject, and primarily, of course, his own knowledge of it.

In the preface already we are astonished to read of Freud's "theory that sexual desire is the fundamental desire underlying *all* other desires and emotions" (author's italics), a view with which the author repeatedly disagrees (pp. vii, 31, 34). He proposes to better it by grouping impulses under the two headings of self-preservation and self-propagation. He evidently does not know that this division has always been made by Freud, who is never tired of insisting on it. As Freud's whole theory of the psychoneuroses is based on the conception of conflict between the sexual and the non-sexual (ego) impulses, this is rather a fundamental misrepresentation, one that we usually expect to find in writers whose knowledge of the subject is gleaned from distant hearsay. The author more especially objects to Freud's supposed belief that nutritional impulses are a part of sex (pp. 29, 30); Freud's actual belief, of course, is merely that certain nutritional impulses are often *accompanied* by sexual sensations.

The novel view is put forward that no shifting of excitability from the clitoris to the vagina takes place as a rule in normal women; when it occurs it is to be regarded as a regression to cloacal erotism. In 150 cases of apparently normal women, three were completely anaesthetic, fourteen felt pleasure chiefly referred to the vagina but without orgasm, and in the remainder, without exception, the glans clitoris was the essential seat of sensation (pp. 88, 89). This is, of course, the opposite of the psycho-analytical theory of sexual development.

In contrast with Freud, who has discovered only one type of



dream, the author recognises three (p. 105). One of these "refers always to incidents in which the actual preservation of life itself appeared threatened". The second, rarer type is the telepathic dream. Then comes the Freudian dream, which is said to comprise over 99 per cent of dreams. (Incidentally, the author holds that over 99 per cent of our actions are determined by past experiences, free will being an exceptional occurrence (p. 256), a statement which reminds one of the "last-ditchers" who used to hold that G. P. I. was due to syphilis in over 99 per cent of the cases, but not always). As to the function of dreams, the author disagrees with both Freud and Jung and is "inclined to a third and more or less intermediate idea" (p. 114). This is that the dream contains both a repressed wish and the sublimation of this.

In the section on psychopathology Freud's classification is "varied slightly in order to simplify it from the point of view of the student" (p. 131, 132). Psychoneurosis is declared to be synonymous with hysteria, and this is subdivided into five: 1. Conversion hysteria. 2. Anxiety hysteria. 3. Compulsion hysteria (compulsion neurosis). 4. Paranoid hysteria (early paranoia). 5. Dementia praecox (certain cases of). We are not told when or how the hysteria passes over into paranoia or dementia praecox, but, quite apart from this detail, to describe this classification as a slight variation from that used by Freud is a considerable stretch of language. The pathogenesis of the obsessional neurosis is given as follows: "The conflict in a compulsion hysteria is generally between a repressed wish and repressing forces which are not true inhibitions, and the condition always reveals a purely erotic basis... It thus differs slightly from the conversion hysteria in its primitive origin... In the compulsion neuroses the actual mechanism of formation is much the same as in the conversion hysteria" (p. 156). The ignorance here displayed is hardly excusable when there exists in English such an excellent account of the subject in Hitschmann's book. The complexes present in the obsessional neurosis are said to be the Oedipus one, the homosexual, anal-erotic, and exhibitionistic (p. 159), *i. e.* practically all the sexual complexes with the exception of the one actually most characteristic of the disease, sadism. Automatic writing and "many cases of alcoholism and drug-taking" are included in the obsessional neurosis, on the curious ground that they are acts not under the patient's control, a feature one would have thought they shared



with all neurotic symptoms. The author has successfully treated six cases of paranoia, with only one relapse, but it may be that he means by this cases of "paranoid hysteria". Dementia praecox is dismissed in a few words, for the author "has not yet attempted to analyse a case of this kind, nor has he been satisfied that any of the cases that have been reported to him as being cases of dementia praecox have in fact been such" (p. 166). This statement is followed by the cryptic remark: "I therefore include this disease in this chapter with some misgiving, and more because several well-known analysts abroad have vouched for it than because I am as yet convinced".

Still more remarkable, however, is the chapter on "the technique of psycho-analysis". Nearly a half of it is taken up with an account of the word-association test, which is a rarely-used adjunct rather than a part of the regular technique. The rest contains almost as many errors in technique as the space could well hold. Ignoring the unrivalled value of the first hour, the author advises not to start with free associations, but with asking questions about the development of the symptoms. In the next hours the history of the patient's life is inquired into, and if he is intelligent this is followed by "an explanation of the nature of analysis and of the constitution of the unconscious mind, it being pointed out what we mean by repressed conflicts and by infantile sexuality". Then begins "the analysis proper", usually with the word association test, after which the patient's attention is directed (!) on to anything that the physician thinks will serve as a starting-point. The patient is not merely allowed to write down his dreams (which is assuredly bad technique), but is asked to take a pencil and paper with him to bed for the express purpose. Transference is thus defined: "The ideas that come to the surface will be projected (!) upon the physician: for instance, the physician may replace the father in the patient's dream, etc." One sees that the author is careless about the meaning of the simplest terms. We learn that the period of transference "will generally be found to be quite short". The practitioner is advised to vary the length of the interview, making it longer or shorter according to the patient's mood, a procedure highly detrimental to the patient's interests. The author often cures cases in less than three months, and quotes one of sixteen years' standing that "cleared up completely in two months".



The most astonishing part of the book is reserved for the last section, that on education. Here an ardent plea is entered for a reform of society on an extensive scale with the aim of reducing the present differentiation of the two sexes. The author states that the world devotes nine-tenths of its whole energy to artificially increasing the difference between the sexes "with the appalling result that while it teaches morality it breeds most potent forms of perversion and immorality as fast as it can" (p. 265). He indulges in a tirade against these harmful differences, such as clothing, the use of different prefixes (Mr. and Mrs.) for male and female, the alternation of the sexes at dinner parties, and so on. The lengths to which his feminism goes must be read to be believed. In fact, the only difference to which he gives assent is the curious one that *women* analysts should be analysed before undertaking work. Now this is not the place to discuss or criticise the views held by the author, which are purely his personal affair, but the strongest protest must be made against his putting them forth in the name of psycho-analysis. To inculcate in a self-styled textbook of psycho-analysis, as part of the teachings of that science, views that would be repudiated as bizarre by every psycho-analyst is a procedure for which it is not easy to find a suitable epithet.

The style in which the book is written is slovenly, and the bibliographical references are always incomplete and most often inaccurate. The more fundamental errors in its contents have already been noted. The following are a few of the less important ones. A *voyeur* is defined as a form of erotic gratification (p. XII). Peeping is described as the active form of exhibitionism (p. 57), whereas really the two activities in question represent the active and passive forms of a single impulse. Reaction-formations are confounded with sublimations (pp. 61, 66), narcissism with omnipotence of thought (pp. 100, 101), and repression with suppression (pp. 107, 108). Freud is said to use the term "Electra-complex" (p. 77), which he has never done—for reasons he has given. Freud's formula for the mechanism of paranoia is ascribed to Stoddart (p. 163).

There is thus much to be said of the book on the negative side. On the positive side we can only say that the author displays a considerable talent for elementary presentation, one which would be useful in dealing with a subject of which he had first



made an adequate study. As it is, we can only designate the book as wholly superfluous and exceedingly misleading.

We wish to comment, in concluding, on the fashion that some publishers have of writing advertisements of books without consulting their authors. We are sure that Mr. Bousfield would never have sanctioned the pretentious announcement of his book as "The first English treatise, by a practising Physician, to furnish an account of the Theory, Technique, and Scope of Psycho-Analysis".

E. J.

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GRUNDZÜGE DER PSYCHOANALYSE. By Leo Kaplan, (Deuticke, Vienna. Pp. 306.).

This book purports to give a systematical account of psycho-analysis. One therefore has to compare it with the only two other books having the same aim, namely Hitschmann's and Pfister's (those by Brill and the reviewer are not quite comparable, being rather expositions of special aspects of the subject). Of the three, Hitschmann's is certainly the most accurate and authentic, its chief defect being its condensed nature and its baldness. Pfister's has the advantage over both the others of containing a large number of examples of analytical work taken from actual cases, but this is more than counterbalanced by the confused and sometimes inaccurate presentation. The principal value of the present book lies in the large amount of material extracted from non-medical sources, the author having evidently an extensive knowledge of folk-lore and allied subjects. The fresh analytical material he contributes consists mainly of dream analyses. A prominent striking feature is the author's agreeable and interesting style. From the point of view of accuracy there is nothing left to be desired. The book, therefore, can be cordially recommended as a valuable pendant to Hitschmann's work, and as a trustworthy introduction to psycho-analysis. It should be mentioned further that the author makes some interesting contributions of his own, notably on the subjects of suicide and narcissism.

E. J.

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HUMAN MOTIVES. By J. J. Putnam, M.D., (Little, Brown & Co., Boston, 1915. Pp. 175.).

This little volume is one of a series designed to extend popular knowledge on the relation of psychology to individual and social



welfare, a matter in which, as is known, the author was specially interested. The six chapters are entitled respectively: Main sources of motives; The rational basis of religion; The psycho-analytic movement; Educational bearings of psycho-analysis; Instincts and ideals; An attempt at synthesis.

In the first chapter Putnam points out the complexity of most motives, and states: "It usually happens that men are moved by broader and better motives than they are consciously aware of, and that to be so moved is, virtually, to acknowledge obligations of which the final implication can be expressed only in ideal terms". This sentence gives the keynote to the whole book. There are two sorts of motives, constructive and adaptive, and to the study of these there are two corresponding modes of approach, that of philosophy and religion on the one hand, and that of genetic psychology (psycho-analysis) on the other. Both are indispensable methods of study, but if forced to choose between them Putnam would prefer the former because it deals with man at his best and highest.

An excellent and accurate general account of psycho-analysis is given, including its history, though for Putnam it "like all scientific doctrines is valid only within certain definite limits". The chapter on the bearings of psycho-analysis on education, though charmingly written, is perhaps open to the criticism of not being precise and concrete enough, especially in regard to sexuality.

It is not necessary here to describe Putnam's views on philosophical ideals and the relation of the individual to the universe, with which the readers of this Journal are already familiar. The book as a whole, though perhaps rather too general and vague, is an admirable exposition both of these views and of psycho-analysis, written in the author's most seductive style.

E. J.

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MILITARY PSYCHIATRY IN PEACE AND WAR. By C. Stanford Read, M.D., (H. K. Lewis & Sons, London. Pp. 168. Price 10s. 6d.).

The opening chapter traces in an interesting way the psychology of the soldier from the recruiting office to the firing line and the second chapter gives an account of military psychiatry previous to 1914 so that a comparison may be made with the prevalence of mental disorders during the war.



The rest of the book is a review of the war from a psychiatric standpoint and few are more capable of performing this task than Dr. Read, for he was Officer in charge of D Block, Netley, for the greater part of the war, and in peace time he had had much experience as medical officer to a large institution for the insane. Moreover, he is up to date and a strict Freudian, as will be seen by reading his book.

The organization for dealing with mental cases in the army is described in detail and he gives the number of such cases received at Netley in the form of a chart, which demonstrates a steady rise during the five years of the war. As the author points out, this is partly due to the gradually increasing size of the army but also to careless methods of recruiting.

The various mental disorders (dementia praecox, paranoia, general paralysis, etc.) are then systematically described, especially in their relationship to war and war conditions, and 32 cases are more or less fully described.

The book is well written and well got up and it contains sound criticisms, which should be taken to heart, of several military and civilian customs in the treatment of the insane.

W. H. B. Stoddart.

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A MANUAL OF NEURASTHENIA (NERVOUS EXHAUSTION). By Ivo Geikie Cobb, M.D., (Baillière, Tindall & Cox, London 1920. Demy 8vo. Pp. 366, Price 12s. 6d.).

This is a full text-book of neurasthenia, where the subject is treated at length from every point of view, aetiology, symptomatology, and treatment. It contains an interesting historical review of the subject, and is indeed mainly a compilation from other writers. The author's attitude is a catholic one on most points. He regards neurasthenia as having a mixed origin, and is willing to concede aetiological significance to almost all factors that have ever been suggested, from pyorrhoea to mental conflict, and therapeutic value to a similarly extensive list of measures, from dieting and administration of inorganic phosphates to psycho-analysis. Following most modern writers he excludes from the conception of neurasthenia, not only psychoneurotic symptoms such as obsessions and phobias, but also the anxiety states, so that his definition of the disease would cover much the same ground as that given by a psycho-analyst.



We regret to note a number of important errors in the work of historical compilation. The common mistake is made of ascribing the first conception of neurasthenia to Beard, instead of to Van Deusen. He gives a diagram to illustrate the evolution of nosological views on the subject (pp. 195, 196) and writes "The later writers (who are not indicated) have again subdivided the symptoms originally included in this latter term (*i. e.* psychasthenia), under such names as 'obsessional or compulsion neurosis', 'anxiety neurosis', etc." He does not seem to be aware that the obsessional neurosis was differentiated thirty-nine years, and the anxiety neurosis seven years, before the appearance of Janet's work on psychasthenia. Ferenczi's important work, which is the chief contribution made to our knowledge of neurasthenia in the past twenty years, is not mentioned.

As no other psycho-analytical writings are quoted, one must assume that the author has culled his knowledge of psycho-analysis exclusively from Stoddart's "Mind and its Disorders", a book which no one, least of all its author, will maintain is an authoritative work on psycho-analysis, for it primarily reflects Dr. Stoddart's own general experience and views. Whatever may be the source of his impressions, Dr. Cobb is under a serious misapprehension when he states that according to the psycho-analytic school (pp. 296, 354) neurasthenia is purely of mental origin, and that the difference between the actual neuroses and the psychoneuroses is that the former are due to a recent mental disturbance and the latter to an older one. As is well known, we hold, on the contrary, that neurasthenia is a purely physical disease: in the reviewer's "Papers", for instance, occurs the passage, "Put simply, the actual neuroses (under which neurasthenia is grouped) are of physical, psychoneuroses of mental origin . . . . It is probable that the disturbances in the physical sphere are ultimately of a toxic nature". Nor is the author's further statement any truer, that "the analytic school claim that analysis is the only real cure". It is equally misleading for him to say (p. 14) that this school believes auto-erotism to be the "sole cause" of neurasthenia (of which supposed view, by the way, he adds the only criticism that "in this volume we cannot confine ourselves to an etiology of this kind; but must collect the views held by different schools of thought and offer them for the consideration of the reader"). Apart from the fact that it is necessary first to define the kind and degree of auto-erotism,



it is evident that the author is confounding the words "sole" and "specific"; we consider, of course, that many factors are operative in most cases of neurasthenia, but that no primary cases occur except in the presence of auto-erotic functioning.

In these circumstances the author's conclusion that he is unable to give complete adherence to what he conceives to be Freud's views on neurasthenia is a matter of no great importance.

E. J.

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FUNCTIONAL NERVE DISEASE. Edited by H. Crichton Miller, M.D., (Hodder & Stoughton, London, 1920. Price 10s. 6d.).

This is a symposium written by eleven authors.

Dr. Miller in his chapter on *Physical Aetiology* points out the importance of taking into consideration the physical as well as the psychical as a causative factor and visa versa.

Dr. Riddoch deals with *Differential Diagnosis*; this is the best chapter in the book.

Dr. Edwin Bramwell on *Physical Treatment* is inconclusive since in his conclusion he states that "most physical symptoms in functional nervous disease demand psycho-therapeutic care".

Dr. Prideaux on the *Mechanism of Hysteria* gives his and other views on the subject. He states on page fifty-two that "Freud's view is that the hysteric has inherited a psychosexual constitution with an excessive development of the sexual instinct". This is certainly incorrect, Freud has never expressed such an opinion. When a writer quotes other people's views he should give the reference to that author's statement.

Dr. Hadfield on *Treatment by Suggestion and Persuasion* does not bring forward anything new on the subject, but deals with it very well on the old lines.

Dr. W. H. R. Rivers in his chapter on *Repression and Suppression* somewhat confuses the reader by assigning definitions to the words which for the most part reverse their generally accepted meanings. It is difficult to see Dr. Rivers' motive for adopting this unusual procedure.

Dr. Maurice Nicoll writes on *Regression* which he deals with from Jung's point of view.

Dr. Miller has written a chapter on *The Mother Complex*. This is the most loosely written and unsatisfactory chapter in the book. Dr. Miller states that the normal method by which emotional



interest of the boy travels through a definite rotation of phases is called "fixation of libido" in Freudian terminology. Freud has never been guilty of stating that rotation of phases or movement is fixation. He makes this further extraordinary statement (p. 119) and prefaces it by saying that it is one so few medical men grasp that "The boy's life of phantasy and romance throughout these twelve years (six to eighteen) dwells entirely with the male sex". This statement is entirely opposed to all known facts. It can only be supposed that for some reason or other Dr. Miller's power of observation in this direction has been very decidedly obscured. His further remarks on the connection between the military neuropath and the inebriate father are wholly unconvincing.

The chapter on *Psycho-Analysis* by Dr. Nicoll and Dr. Young is simply built up on the Zürich teachings and therefore should not be called Psycho-Analysis. In support of this last remark I quote from Dr. McDougall's *Summary* of the chapters of this book in which he states (p. 197), "Psycho-analysis, as commonly understood, implies that these procedures are undertaken by a physician who accepts a mass of highly speculative doctrine emanating from Vienna; and, since the founder and followers of this school have an indisputable claim to this term, it is only fair and expedient to avoid the use of it where it is not intended to imply the acceptance of these esoteric doctrines". This pronouncement, coming from such an authority as Dr. McDougall, is the most illuminating statement in the whole book and it is hoped that it will be universally adopted.

The last two chapters in the book on *The Management of the Neurotic, Institutional* by Dr. Bryce and *Individual* by Dr. Culpin contain some useful points.

Douglas Bryan.

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DREAMS AND PRIMITIVE CULTURE. By W. H. R. Rivers, M.D., F.R.S., (Longmans, Green & Co., London, 1918. Pp. 26. 1s.).

This is a lecture delivered at the John Rylands Library, Manchester, in April 1918. The object of the lecturer is to point out that the resemblances which Abraham and others have remarked on between dreams and myths are also to be observed between dreams and primitive culture, *i. e.* that the principles of psycho-analysis have a wide validity in this field. He gives first an account of Freud's theory of dreams, which he seems to accept as true



with certain reservations, notably as regards the formulation of the censorship concept. He then takes it point by point, distortion, symbolism, dramatization, displacement, condensation, secondary elaboration, wish-fulfilment, and so on, and illustrates all these processes by parallels drawn from his own experience in Melanesia. He meets the possible objection that such parallels can be found if only one searches widely enough, first by confining his examples to one single island two miles wide, and then by laying stress on the closeness of the parallels cited.

As this is a book distinctly to be read by psycho-analysts, only one or two features will be noticed here. Dr. Rivers considers that sensorial imagery is much more vivid in savage peoples than in civilised, even going so far as to speak of their "almost exclusive interest in the concrete", and suggests that the prominence of this feature in the primitive mind accounts for the strikingly dramatic nature of most of their rites and ceremonies, as it does in the case of dreams. His chief departure, and an ominous one, from the views held by psycho-analysts, concerns the importance of sex. He holds that "the emotions based on the instinct of self-preservation take a far more important place as motives for rite and custom", and, indeed, that "there is reason to suppose that when sexual motives are found in apparently primitive culture, they are the result of an influence from without, a product perhaps of degeneration rather than a sign of infancy". The question of how greatly primitive races differ from civilised ones is a much disputed one, but we had never suspected that the difference could be so great as this seems to indicate. If it is true it may explain why the sexual life of savages is passed over so hurriedly in most works of description, but we had always supposed that there were other reasons for this.

Dr. Rivers, the President of the Royal Anthropological Institute and of the Folk-Lore Society, is the first eminent ethnologist to display a serious interest in psycho-analysis, and he is to be congratulated on the beginning he has made.

E. J.

\*

MAGIC IN NAMES. By Edward Clodd, (Chapman & Hall, London, 1920. Pp. 238. Price 12s. 6d.).

It can be said at once of this book that it should be in every psycho-analytical library. It is an exceedingly valuable collection



of material, well ordered and clearly expounded. The author wisely confines himself mainly to the presentation of this material, adding but little in the way of comment or explanation.

He begins with a description of the wide-spread belief in *mana*, in the power of influencing the world by non-natural processes, one probably identical with what in psycho-analysis is termed "the belief in the omnipotence of thought" (*Allmacht der Gedanken*). How astonished anthropologists would be to know what a *mana*-like attitude is shown by the unconscious mind of the normal civilised adult!

The author describes how this belief is attached, first to concrete parts of the person such as the blood, hair, teeth, saliva, and so on, then to less material objects like the portrait, shadow, reflection, echo, and so leads up to the main theme of his work, the ideas and feelings of magic attaching to names of all sorts. This is subdivided into sections on personal names, names of relatives, birth names, initiation names, euphemisms, names of kings and priests, names of the dead, and names of gods. It becomes clear that the primitive mind attaches a perfectly extraordinary significance to names, and treats them on the one hand as concrete things in themselves and on the other as integral representatives of the personality. The belief, for instance, that it is safer to conceal one's name, and that possession of it by an enemy gives him complete power over one, is to be met with in all parts of the world. The author, whose life's work has lain in anthropology and folk-lore, confines himself, it is true, mainly to savage races and peasants, but illustrations could be drawn from the most sophisticated classes and nations: he might, for instance, have commented on the dread thrill that passes through our House of Commons when the Speaker, on desperate occasions, has recourse to the last resort of threatening to "name" the recalcitrant member, one that rarely fails in its aim! It is thus far from true to say, as Mr. Clodd does, that "to the civilized man, his name is only a necessary label". Every medical practitioner knows that in a case of unconsciousness the patient's own name is the last sound to which he will fail to respond, and through Stekel's work on *Namenverpflichtung*<sup>1</sup> we know to what an extraordinary extent a person's character and interests can be unconsciously influenced by the meaning of his name.

<sup>1</sup> See, for instance, Dr. Oberndorf's paper on page 223 above.



We see thus yet another field waiting to be fertilised by psycho-analysis, and in the meantime are grateful to Mr. Clodd for grouping the necessary material in such a useful and presentable form.

E. J.

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RELIGION AND CULTURE. A Critical Survey of Methods of Approach to Religious Phenomena. By Frederick Schleiter, (Columbia University Press, New York, 1919. Pp. 193 and Bibliography).

As the title indicates, this volume is intended rather as a critical review than as an original contribution to this extensive subject, one covered by such terms as comparative religion, social psychology, anthropology and ethnology. The author is mainly concerned with the difficult question of methodology; he discusses the criteria we possess for the interpretation of anthropological data, the principles underlying the various modes of approach, and the most suitable starting points for investigation. These are very complex problems, which can only be discussed in an appropriate place and at considerable length, so that the reviewer will confine himself here to giving his impression of the book as a whole.

One feels that the author, doubtless in the endeavour to be objective, has refrained too much from constructive criticism of the methods he deals with, so that the book consists too much of a series of quotations of one theory and method after another, and fails to present the organic relations between them in an imaginative way. It serves the purpose excellently well of orienting students as to the main trends of work in these fields, and provides a useful and well-chosen bibliography. That his presentation of these, however, is not always to be depended on may be illustrated to the readers of this Journal familiar with the dynamic psychology of Freud, by the following passage, where they will be astonished to read that Freud "considers that they (*i. e.* the traditional principles of associationism—contiguity in space and time, cause and effect, and similarity) constitute a satisfactory explanation of the juxtaposition of psychic content involved in magic. The support of this position by Freud is nothing short of a curious anachronism". As it is mainly Freud's work which has made such a position an anachronism, the comment is distinctly entertaining. The absurdity of a further passage "Freud states that he was led



to the use of the term '*Allmacht der Gedanken*' by means of the psycho-analysis of a man who seemed to possess it in a striking way" may be due merely to careless writing, but the author's grasp of the subject is not such as to encourage one to give him the benefit of the doubt on the point. The usefulness of the book is unfortunately marred by its being written in a barbarous German-American which makes it very trying to read.

E. J.

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**THE INDIVIDUAL DELINQUENT.** A Text-book of Diagnosis and Prognosis for all concerned in understanding Offenders. By William Healy, B.A., M.D, (Heinemann, London. Pp. 830. Price 21s. net.)

Although this book purports to deal with the subject of criminology in general its main concern is with juvenile delinquency. This is probably due to two considerations: a personal one, that the author has had his attention specially directed to this aspect of criminology through having spent the last five years as Director of the Psychopathic Institute at the Juvenile Court, Chicago; the other a wider one, namely, that anyone who, like the author, makes a scientific study of criminology must soon see that the main problems, particularly the all-important ones of genesis, relate to childhood and its development.

The volume is divided into two books. In the first, entitled "General Data", there are four preliminary chapters, then four on "working methods" and statistics, with two on general conclusions as to treatment. The methods of investigation described are especially fully dealt with, and this section is exceedingly valuable. The second book, entitled "Cases, Types, Causative Factors", comprises the larger part of the whole volume. The questions of heredity, antenatal and natal factors, and physical abnormalities in development are first discussed. Then follow a number of chapters on psychological factors, environmental and intrinsic; the subjects of mental conflicts and "repressions" are considered at length, special stress being laid on the all-important matter of sexual development and experiences. There are several chapters on the various kinds of mental deficiency and inferiority, ranging from dulness to actual idiocy. The influence of epilepsy and alcoholism is discussed, and an interesting account given of special mental peculiarities,



such as pathological lying, love of excitement, abnormal social suggestibility, etc. An imposing bibliography and a full index conclude the volume.

The book is one of a series dealing with different aspects of criminology, and it is quite one of the best of the series. It will, indeed, easily take rank as one of the few works on the subject that really count. The author's enthusiasm, erudition, and level judgement are stamped on every page. His views, though very sympathetic, err, if at all, on the conservative side, and his special talents are rather social than psychological. But, as the reviewer knows from first-hand experience, he has been at the centre of the band of devoted workers that in the past few years have revolutionised the treatment of juvenile delinquents in Chicago, and his influence has radiated over the whole of the United States. A work of this extent from his hand, therefore, is one that will necessarily arouse the strongest interest on the part of all those who have to deal with such problems.

E. J.

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PROBLEMS OF SUBNORMALITY. By J. E. Wallace Wallin, (World Book Co., New York, 1917. Pp. 285.).

This volume is concerned with the problems of the feeble-minded, the group between normal children on the one hand and imbeciles on the other. It is divided essentially into four parts dealing respectively with: the exact diagnosis of the presence and degree of feeble-mindedness, the differential modes of education needed for such children, the questions of after-care and the use to which the feeble-minded can be put, and the social and preventive problems concerned. In addition there are chapters on the general question of the changing attitude towards the feeble-minded, epilepsy, State provision for defective children, and the hygiene of eugenic generation.

The most valuable portions of the book would seem to be the first section, which gives an interestingly written historical review of the development of our knowledge on the subject, and the second one, dealing with the problems of psychological diagnosis. Wallin rightly insists that this diagnosis and exact grading can only be made by specially trained experts. "A few years ago the assumption was made that practically any intelligent person could



determine whether or not a child or adult was feeble-minded by a few minutes examination by means of the Binet-Simon scale, with the aid of certain arbitrary quantitative standards of mental retardation", whereas "it is not probable that it (this assumption) is now entertained by any considerable number of clinical psychologists". He gives a detailed and convincing criticism of the fallacies of the Binet-Simon scale, though he omits to mention what in the reviewer's opinion is the chief one—namely, that it makes no allowance for the varying affective, and often unconscious, attitude of different children towards the individual tasks comprising the examination. Wallin's own methods of examination lead him to define feeble-mindedness in a much narrower sense than is usually done, particularly in its upward direction, and he would not class any child as being feeble-minded or as needing special education unless there was reason to conclude that in the future he would not be able to earn his living independently.

The chapter on epilepsy is conventionally written, and the only contribution it makes is the description given of the characteristic reactions of the epileptic child to various intelligence tests. Most noteworthy is the omission of any account of Pierce Clark's recent remarkable work on the psychology of epilepsy. Indeed, one notes throughout an unfortunate failure to take advantage of the medical work done in the allied field of the neuroses.

Wallin has an unusually rich experience of most of the problems directly concerning feeble-minded children, and his book contains a mass of detailed and original observations and statistics. For those working in this field the book will be of very great value, but it is too diffusely written and too voluminous to be of much service to non-specialists.

E. J.



## NOTES

A Washington Psychoanalytic Society has been inaugurated, under the Presidency of Dr. William A. White.

In the current session Mr. J. C. Flügel delivered a course of ten lectures on Psycho-Analysis as part of the regular course in Psychology at University College, University of London. This is the first time that the subject has received official recognition in any University in England.

In October and November Mr. Cyril Burt delivered ten lectures on "Psycho-Analysis and Education" as part of the courses organised for the teachers of the London County Council Education Department. The enrolment had to be limited to 200, for lack of further accommodation.

On October 13th. Professor A. G. Tansley, University of Cambridge, gave an address on "Freud's Theory of Sex considered from the Biological Standpoint" before the British Society for the Study of Sex-Psychology. The speaker expressed his opinion that the theory was throughout well founded biologically.

On January the 7th. 1921 Dr. S. Herbert of Manchester addressed the same Society on the subject of "Sex and the Unconscious", speaking entirely from the psycho-analytical point of view.

On February the 2nd. 1921 Dr. Ernest Jones gave an address on "Some Unconscious Mental Mechanisms" before the University of London Psychological Society.

At the examination in Psychology for the Cambridge Diploma of Psychological Medicine, October 1920, two of the six questions were on Psycho-Analysis.

In July 1920 a Discussion on Psychotherapy took place before the Section of Neurology and Psychiatry of the British Medical Association. Psycho-Analysis was not well represented there, and the meeting was chiefly noteworthy for a violent diatribe against it on the part of Dr. Gordon Holmes.

There was a Discussion on Psychotherapy at the Australasian Medical Congress held in Brisbane, 1920. Papers were read on treat-



ment of the war neuroses by Drs. Godfrey, Rowden White, Garnet Leary, and Ralph Noble, describing the methods in use in England, and dealing largely with psycho-analysis.

The *Prescriber* devoted a special number in December to Psycho-Analysis. The main articles were by Dr. Henry Somerville and Mr. Cecil Owen. The editorial article insists strongly on the necessity of practitioners acquiring at least some knowledge of the subject.

In December and January there appeared in several London newspapers a flood of articles and letters purporting to refer to Psycho-Analysis. The general tone was that of alarmed denunciation of the occult and immoral tendencies supposed to be associated with it. The only facts cited were that some persons advertise in occult magazines pretending to employ Psycho-Analysis, whereupon the fear was vividly expressed that they might, telepathically or otherwise, obtain access to personal secrets and exploit these from either sexual or mercenary motives. After a while it became recognised in the better-class papers that these alleged practices, which by the way there is no reason to think had ever taken place, had nothing to do with Psycho-Analysis itself, and emphasis was laid on this obvious consideration in a leading article of the British Medical Journal of January the 22nd. entitled "Quack Psycho-Analysis".

#### OBITUARY

We regret to have to announce the loss through death of one of the members of the British Psycho-Analytical Society, Colonel W. D. Sutherland, I. M. S. Though his life's work lay in other fields, those of medical jurisprudence, pathology, and bacteriology, he took a very considerable interest in the more human aspects of psychology. He had a remarkable knowledge of Indian Folk-Lore and made a number of contributions to Krauss's *Anthropophyteia*. He never practised psycho-analysis, but always took a lively interest in the subject and maintained a regular correspondence on it with several of its exponents. In 1911 he visited Professor Freud in Vienna and in 1920 was present at one of the meetings of the British Psycho-Analytical Society, of which he was one of the original members.

We regret also to announce the death of Dr. Skevirsky of New York, a member of the New York Psychoanalytic Society.



## REPORTS OF THE INTERNATIONAL PSYCHO-ANALYTICAL ASSOCIATION

### ABSTRACTS OF THE PROCEEDINGS OF THE SIXTH INTERNATIONAL PSYCHO-ANALYTICAL CONGRESS

Held at The Hague, September 8th to 12th., 1920.

DR. K. ABRAHAM, Berlin. Forms of Expression of the Female Castration Complex.

There are various possible outcomes of the female castration complex. The normal or cultural form, as Freud calls it, is that the woman is reconciled to her femininity; the desire to possess a male genital organ is given up and in its place appears the wish to have a child (really as a gift from her father). This enables the woman to obtain gratification from the female sexual rôle and to develop maternal feelings.

The ambivalent (archaic) attitude is opposed to this outcome. Besides the love for the man to whom she at first belonged, the woman produces feelings of hate in connection with her defloration, because the injury to her physical integrity re-awakens the castration complex. Traces of this form of reaction can still be observed in civilised conditions.

A third outcome is the turning to homosexuality. This possibility is based on the bisexual disposition of human beings. In some of the cases the homosexuality is principally expressed in a sublimated form.

The neurotic outcomes, which are really the object of this paper, are extremely multiform, and many of them up to the present have hardly been noticed.

These neurotic symptoms partly express the wish to be male and partly are directed against the man in the sense of revenge (castration, killing). A number of symptoms and dreams, which agree in content with the symptoms, were discussed. In those mentioned first the patient unconsciously plays the male rôle or she expects to become male. Certain of the neurotic symptoms



manifest themselves in parts of the body, which are made use of as surrogates for the male genital. Other symptoms represent the complete refusal of the male, but at the same time they have an active castration purpose (vaginismus, etc.); or they contain a dread of such an action. Again other symptoms serve for the disparagement or disappointment of the man.

Certain women, who can only accustom themselves with great difficulty to the disadvantage with which they were born, under no circumstances wish to be reminded of the painful thing, they avoid with over-sensitiveness anything that could have this effect. Horror of wounds is a particularly marked symptom of this kind (wound = female genital).

The tendency to compromise formation is also met with here as throughout in the psychology of the neuroses. Many women are quite satisfied in their female rôle provided they are the most beautiful and most desired of all others, or if a man who puts all other men in the shade as regards manliness desire them. Another expression of the female castration complex is that the man in his male (that is to say genital) function is acknowledged, only her own genital is withdrawn from use and the libido is displaced to the oral or anal zone. Then perversions or conversion phenomena take place in connection with these erotogenic zones.

Women with such an attitude transplant their castration complex to their children. They make it more difficult for girls to accept their femininity, and they permanently injure the boy's narcissistic pride in manliness. The castration complex in the mother, in particular her anal-erotism, is an important factor aetiologically as regards the pathological expressions of the castration complex in the children. The treatment of the woman therefore offers a possibility of guarding the descendants against the risk of a neurosis; here lies a particularly fruitful field of work for psycho-analysis.

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DR. HELENE DEUTSCH, Vienna. On the Psychology of Suspicion.

The lecturer deals with the psychic mechanisms of suspicion as a neurotic symptom, as a character trait, as a psychic phenomenon in deafness, and as a phenomenon of mass psychology.



The conduct of the suspicious person towards his environment shows that he is in constant expectancy of a hostile attack, and that he seeks to protect himself from this. Since this danger threatening him is not real, or observed in the external world, psycho-analysis considers that it has its origin in the unconscious. The mechanisms concerned with suspicion as a pathological symptom are discussed in four analysed cases. In the first case the suspicion corresponded with the projection of the endopsychic perception of an impulse of danger threatening the ego from the unconscious. Allusion was made to certain analogies between this mechanism of projection and the mechanism acting in anxiety hysteria.

In the second case the symptom was explained by the conflict of ambivalency, in that the suspicion represented the projection of repressed hate tendencies into the external world. The relations existing between suspicion and doubt were discussed.

The suspicion in the third case had its cause in the continual oscillation of the libido between heterosexual and homosexual object choice. This psychic formation showed that every attempt at object choice was accompanied by strong negative tendencies. The endopsychic perception of tendencies hostile to the ego of homosexual and incestuous love was projected externally, likewise hate directed against the woman or the man succumbed to projection and was apperceived as suspicion.

The fourth case, a beginning paranoia, showed great suspicion before the outbreak of the psychosis, in which nevertheless hysterical mechanisms could be demonstrated. The relations of suspicion to paranoia were discussed with especial reference to the differences and analogies.

Suspicion makes use of projection like the delusion of persecution, but in distinction from paranoia it does not always have homosexuality as its basis; also there is lacking the characteristic change of affect seen in paranoia.

In the origin of suspicion as a character trait the same mechanisms of projection hold good, the endopsychic perception of an impulse of danger, with the exception that here the individual has definitely freed himself from the danger in this manner. The constitutional strengthening of the anal-sadistic impulses offers particularly favourable conditions for the origin of suspicion, whereby one's own hostility is projected externally and produces the feeling of the threatening danger.



In the origin of suspicion in deafness it is assumed that the strengthening of the sadism present in everybody comes about through the weakening of the ego; also human beings apparently need the control of all their senses in order to resist the feeling of uncertainty in the external world arising from their own hostility.

It was also noted that suspicion after the war had become a general phenomenon, and this goes back to the sadism released through the war, of which suspicion forms the last trace.

Another important cause of suspicion is seen in the disappointments which the child has experienced in his first love objects. These disappointments leave behind the scar which contributes to the deformity of character in the sense of suspicion, or under suitable conditions can lead to the appearance of this symptom in the neuroses.

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DR. A. STÄRCKE, Den Dolder, Holland. The Castration Complex.

The Castration Complex is one part of a disposition towards ambivalency, the other part of which—namely, wishes and tendencies of various kinds and the infantile theory of the woman with the penis—shows the same origin.

The infant acquires this disposition towards ambivalency while sucking at the mother's breast or the bottle; the excremental functions are also factors concerned, as has been described by Prof. Freud, and perhaps the act of divesting the infant of other things, as for instance clothes, may play a part.

Attention is directed towards deviations from the normal nursing, as these must exercise an influence on the budding psyche which cannot be overrated. It is suggested that the pains the mother suffers while nursing may be of importance for arousing or fixing sadistic tendencies, and also that the situation at the breast introduces the process of projection. The nipple in the baby's mouth is, in accordance with his degree of development a part of his own body. The withdrawing of the nipple and the excremental functions engender the first traces of the conception of a separate outer world. The wish to reunite the Ego and the



outer world, a desire which is equated with the striving after happiness, means the wishing of the sucking situation back again. The formation of the outer world is the original castration; the withdrawal of the nipple forms the root-conception of this.

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DR. V. HATTINGBERG, Munich. Transference and Object Choice; their Significance as regards the Theory of Instinct.

The theory of transference like that of object choice is based on the idea that feeling and impulse are independent of their object. This statement of Freud, in support of which are brought forward many examples from the instinctive life of animals, is a central point for the whole theory of instinct. From the various possible conceptions of instinctive actions are eliminated all those that consider the object as essential for the instinct, whether as a stimulus as in the Tropism theory and the reflex theory of the instincts, or as aim or idea of purpose as in the psychology of consciousness. There remain only two possible conceptions, one that claims a condition of the individual himself as point of relation as regards "direction", the essential thing in instinctive actions. Instinct actions are alterations of the entire conduct which appear in typical situations. They are connections of functions and alterations of functions which originate in a typical initial state of the individual (craving) and which lead to a typical final state (gratification). Impulses are then directions of such sources. The second point of view is the dynamic one. Its value for representation is undoubtedly very great if the instinct occurrence is to be described in itself and in its various forms. It fails in the presence of the multiplicity of the instinct life in its various directions. Every dynamic conception compels us to assume necessarily a single force, that of "a libido" (Jung's desexualised libido). If, however, it is the same libido that is expressed in all instincts, then a more precise definition of its particular direction becomes necessary, if we wish to understand not only that there is such a thing as once hating, once loving, but also that hostile tendencies may be expressed in friendly actions. If affects and impulses are not directed by means of ideas, but on the contrary, ideas by affects and impulses, if therefore impulses determine the direction



of the course of the association, then they must above all be characterised by means of a particular direction. This, however, can be represented better through the reference to the final conditions typical for each part than through the libido theory that refers everything to the fundamental comparison of a fluid.

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J. C. FLÜGEL, B.A., London. On the Biological Basis of Sexual Repression.

The psychological contrast that is expressed in sexual repression may be considered as a special case of a more general biological contrast.

This contrast permits of two points of view that are closely related to one another. 1. The psychological. There necessarily exists a reverse relation between the degree of higher organisation and activity of the individual organism on the one hand and of its reproductive energy on the other. 2. The economic. In consequence of the limited quantity of available nourishment a high level of the individual life results in the control of the number of individual beings, and thereby of the tendencies of reproduction.

Natural selection determined in the course of development the relation of the energy made use of for individuation and for genesis. In the main, development has brought with it a continual increase of individuation at the cost of genesis; nevertheless there are important influences that have made the advance in that direction slow and difficult.

In mental life the contrast between sexuality and work (sublimation) corresponds with this biological contrast between genesis and individuation.

The sexual impulses up to a certain degree represent an older and more primitive form of the forces of life. Mankind is constantly endeavouring to adapt itself to a condition in which sublimation plays a greater and the sexual impulses a lesser part. However, at present a very serious "disharmony" exists in this respect, since the sexual impulses of the human being absorb a greater portion of their entire energy than their present environment requires.



The relation between sexuality and sublimation (that is to say between the psychological aspects of genesis and individuation) is complicated; the same energy is in the last instance made use of for both, so that there is no adequate sublimation without strong libido. Further complications arise through certain factors which render necessary the utilising of certain portions of libidinous energy for sexual purposes throughout life: 1. The actual necessity of reproduction. 2. The slow and gradual construction of the sublimation process. 3. Definite relations between sexual and individual development, in consequence of which a satisfactory adaptation to the non-sexual sides of existence is impossible, as long as a corresponding degree of sexual development is lacking.

The physiological and biological method of consideration of the contrasts between individuation and genesis can only be applied directly in regard to the sexual impulses in so far as these stand in the service of reproduction, but from the psychological point of view the contrast is expressed also in reference to elements of sexuality not serving reproduction, since their energy stands in reverse relationship to the energy given up to sublimation. Nevertheless the allo-erotic elements succumb in many respects to a greater degree of repression than the auto-erotic ones, with the result that the latter become strengthened at the cost of the former.

The higher stages of individuation are closely bound up with the process of socialisation. It seems therefore that the sexual repression up to a certain degree can be traced back to the influence of social forces.

A certain degree of inhibition seems to have become a part of the human sexual instinct. Two important factors are distinguishable. 1. The fact that a strong sexual repression cannot be overcome at once, but only slowly and gradually. 2. The secondary gain of pleasure that can be obtained through the relief of greater tension which repression brings with it.

The general recognition of the facts that are associated with the biological aspect of sexual repression would considerably contribute in removing the greatest difficulties of human existence, as well in the psychological sphere (the sexual conflict) as in the economic sphere (the relation of population to the means of subsistence).



PROF. G. JELGERSMA, Leyden. A Psycho-Analytical Contribution to the Theory of Feeling.

So far psycho-analysis has supplied few contributions to the theory of feeling. Freud has briefly alluded to it in a work on a different subject, otherwise there is nothing to be found. The investigation of the theory of feeling has a large place in the scientific psychological literature.

However, psycho-analysis can also render valuable contributions. The lecturer gave a short sketch of his theory which approximated to that of Ebbinghaus, and he explained his views from the symptoms of the transference neuroses and schizophrenia.

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DR. HANNS SACHS, Vienna. Day-Dreams in Common.

That the day-dream is a preliminary stage of poetry is one of the most familiar statements of psycho-analysis. So far it has remained unexplained where one is to look for the cause of the transition from the strict egocentric day-dream, bound to no formal principle, to the work of art that renders enjoyment possible to outsiders through the force of attraction of the aesthetic form. One had to be satisfied with the psychologically inaccessible factor of the hereditary disposition.

As a stage of transition between day-dream and poetry the "day-dreams in common" come into consideration in which two or more persons cooperate, therefore giving up the limitation to the closest ego-interests. The analysis of two such cases showed that it was a common feeling of guilt that sought relief and found it in the working out of the day-dream, since in it lay an unconscious admission of the same guilt of the other party. The feeling of guilt caused the individual personality to appear less prominently in the foreground.

That is the root in the day-dreams in common that in the work of art is the aim unconsciously striven for. The artistic illusion does not rest on deception of the senses, but in the fact that the receptive person experiences also the affects of the work — consciously as well as unconsciously. If the poet achieves this illusion, that is to say, if he succeeds in getting the public to regard his work as a work of art, then the public says to him:



"Yes, your forbidden wishes are ours; we desire the same as you desire and have carried out in phantasy"; the public therefore declares itself as being guilty and softens the artist's feeling of guilt.

The artist's own person has to step into the background for the sake of the effect of his work. The narcissism sacrificed thereby is displaced from the author to the work—an ideal fragment of his self—and returns as beauty of form. In this round-about way the narcissism returns to its original gratification, for the artist now finds personal recognition and interest which otherwise remained denied to the man of phantasy who keeps aloof from action.

It is a postulate of psycho-analysis that at the basis of every great advance of civilisation must lie the repetition of the primitive crime. This postulate is fulfilled by the above sketched hypothesis. The day-dream as we know, is built up, in the last instance on the *Œdipus* complex. The day-dreamer by yielding to his phantasies repeats the primitive crime—but alone, and this is an offence against the oldest law of mankind, according to which this may be committed only by the whole community of brothers acting together. The artist finds the way from the insupportable isolation to the brothers and their common guilt.

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DR. THEODOR REIK, Vienna. The strange god and one's own god.

The lecturer began with the point that strange deities and their cult frequently give an uncanny impression. He endeavoured to explain this effect through the continuity of animistic convictions and for comparison drew parallel cases from the symptomatology of the obsessional neuroses. The history of religions gives the final explanation of these peculiar reactions of feelings. The henotheism of the brother clan knew only one god; through the differentiation and local dissemination of mankind it happened that each clan had its own god which was equal to that of the other clan, and like that one was represented as active and effective. It was only later that the identity of the strange god and one's own god was no longer recognised. The strange god appeared as



a caricatured double of one's own god through the advance of civilisation of the one tribe and the falling back of another. The uncanniness is therefore brought about by means of a returning to individual phases in the developmental history of mankind. As a second source of the feeling of uncanniness was cited the excitation of feelings from analogy with the infantile complexes arising out of impressions and occurrences of primaeval history. The uncanniness arising from the primary complexes in the history of mankind proves to be more obstinate than that connected with overcome complexes. Here for example belong the castration and incest complexes, as well as those feelings originating from the repressed revolutionary impulses. The pre-existence of the guilty conscience towards one's own god is a determinant for religious persecution (Jewish pogroms, Armenian massacres). The strange god was once one's own god that was alienated from the masses through the pressure of development and advance of civilisation, and which appears in its cruder and more primitive form now as uncanny.

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DR. GÉZA RÓHEIM, Budapest. Central Australian Totemism.

Alcheringa as dream period. A primitive phase of totemism, as pure wish-fulfilment, is reflected in the traditions of the Arunta. Eating of the totem and totemistic incest. The Inapertwa as mythical embryos, the Alcheringa hero as a projection of the omnipotence in the mother's body on to the father's image.

The ignorance of procreation on the part of the Arunta: a crucial question of social anthropology and an experiment for the psycho-analytic methods of investigation. Unconscious sexual knowledge that is shown in myths concerning procreation. Eating as a marriage ceremony and as cause of pregnancy. The boomerang in the myths of procreation and love magic as penis. The pre-natal single combat with the father as a cause of birth. In other words, every birth is unconsciously traced back to incest. The cause of the ignorance of the Arunta is repression. This is directed against sexuality in general, because this is unconsciously identified with the Œdipus complex. The centre of the totem as projection of the body of the mother into the external world. The Churinga as "another body" or "external soul"—a symbol of the embryo in



the body of the mother; on account of this is ascribed to it the procreation of children. (As already noted the Churinga also signifies the penis). The Arunta theory of the procreation of children is an unconscious infantile wish fulfilment; through it the child becomes its own father and supernatural husband of the mother.

The ceremonial of the Central Australian totemism, the Intichiuma rites. Their performance at the approach of the time of general fruitfulness in nature figures in the traditions as representation and equivalent of coition. The magic (procreation) and imitative element in the Intichiuma is analysed. The anthropic significance of the Intichiuma is the Alcheringa: original aim the propagation of human not animal members of the totem clan. Intichiumas of the totem of children. The Intichiuma is the continuation of a pre-human rutting period. Young men as spectators in the Intichiuma instead of women: the commencement of repression and homo-erotic element in the Intichiuma. The rutting period is also the time of combat: the struggle between young and old males must have taken place in the rutting period. The eating of the totem as a propagation rite is a symbol of the rebellion, but also a symbol of the compact between young and old males. The connection between the origin of repression and the disappearance of the ruttings periods. Repression originally directed against the *Œdipus* complex. An attempt to determine the phase of development that is represented in the Intichiuma. Continuation of the analysis of the procreation rites. The beating of the rock of the Alcheringa hero, a symbolic repetition of the father murder. Unconscious association between parricide and procreation, since each sexual intercourse occurs with the mother it cannot be completed without first killing the father. Tearing to pieces and procreation: parallel characteristics in initiation rites. The ego and the libido both add their contribution to the development of the Intichiuma rites.

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DR. ERNST SIMMEL, Berlin. *Psycho-Analysis of the Gambler.*

The treatment of a young man, who in consequence of his passion for gambling was in danger of complete demoralisation and who had several times been in conflict with the police and



had been sentenced to imprisonment, gave, besides the cure that resulted, a characteristic insight into the genesis and unconscious structure of the passion for gambling itself.

It serves the unfolding or the substitute formation of the exceedingly active pre-genital anal-sadistic libido in the unconscious.

The fortune gained and lost at play proved to be much over-determined.

The insatiable inordinate desire that will not rest in the endless vicious circle until the loss becomes gain and the gain once more loss, originates in the narcissistic desire of the anal birth phantasies, to fructify himself, to devour his own excrement, gold, and to give birth to himself out of himself in immeasurable increase, replacing and surpassing his father and mother. The passion for gambling therefore gratifies ultimately the inclination for the bisexual idea, which the narcissist finds in himself; it serves the compromise formed of man and woman — active and passive — sadism and masochism — and finally the unsettled decision between genital and anal libido, for which the gambler battles in the well known colour symbol, "rouge et noir". The passion for gambling thus serves auto-erotic gratification, whereby the playing is fore-pleasure, the gaining orgasm, and the loss ejaculation, defecation and castration.

In a brief survey of the historical development of games of chance it was shown that in the individual development of the gamester is repeated, as it were ontogenetically, the phylogenetic formation of the game of chance; that is to say, that on the developmental path of mankind games of chance are a reservoir for the anal-sadistic impulses held in the state of repression.

In conclusion a brief retrospect concerning the psychogenesis of the criminality of the patient was given; and, proceeding from the well known impulse of the criminal to defecate at the place of his misdeed, it was pointed out that the anal-sadistic impulses were effective here in the same sense, whereby the narcissist who is rejected and avoided by the father becomes "Herostratus". It is then no longer the Œdipus complex of the perpetrator that determines the tendency to criminality, but the Laios complex of the revenging and punishing father and his imagines, for example, the public prosecutor.



PROF. SIGM. FREUD, Vienna. Supplements to the Theory of Dreams.

The lecturer in his brief remarks dealt with three points in the theory of dreams. The first two concerned the theory that the dream is a wish-fulfilment, and certain modifications of this were advanced; the third point referred to a complete corroboration of his rejection of the so-called prospective tendency of the dream. It was put forward that one had grounds for recognising, besides the well-known wish and anxiety dreams which lent themselves easily to the theory, a third category which he called "punishment dreams". If one takes into consideration the justified assumption of a special self-observing critical factor in the ego (ego-ideal, censorship, conscience) then these punishment dreams are also to be subsumed under the wish-fulfilment theory, since they represent the wish-fulfilment of this criticising factor. They have the same relation to the ordinary wish dreams as the symptoms that have arisen from reaction formations in the obsessional neuroses have to hysterical symptoms. A more serious exception to the rule that the dream is a wish-fulfilment is found in the so-called "traumatic" dreams, as found in patients after accidents, or in the reproductions of forgotten psychic traumata of childhood in the psycho-analysis of neurotics. In reference to their connection with the wish-fulfilment theory, allusion was made to a work soon to be published called "Jenseits des Lustprinzips".

The mention of an unpublished investigation of Dr. Varendonck of Ghent formed the third point. Varendonck had found that he was able to bring in a great measure to his conscious observation the unconscious phantasying when half-asleep (called by him "autistic thinking"). It was established that the seeing beforehand of the possibilities of the next day, the preparation of attempts at solution and adaptation, etc., fall quite within the realm of the pre-conscious activity, which produces the latent dream thoughts and as the lecturer had always maintained has nothing to do with the dream work.

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DR. S. FERENCZI, Budapest. Further Extension of the Active Technique in Psycho-Analysis.



"Active technique" is only a new name for something that has been constantly used in psycho-analysis. The cathartic therapy was pronouncedly active; the Freudian psycho-analysis demands from the doctor and the patient before everything else a passive giving up to free associations. But the interpretation is already an active interference on the part of the doctor. The only activity that we hitherto demanded from the patient was the overcoming of resistances to ideas. Another kind of activity was used in certain cases of hysterical phobias. The patients were urged to re-experience the situation causing the phobia and anxiety and this resulted in advancing the analysis (reminiscences, etc.). According to Freud the chief rule of the activity is that the cure has to be carried through in abstinence. In many cases the activity was used in the form of orders and prohibitions, always against the direction of pleasure. He caused the patients to seek situations that produced discomfort; finally when they became pleasurable to them they were prohibited. The therapeutic effect in producing further associations was striking.

The indication for the active technique is limited to certain exceptional cases, or to those showing stoppages in the analysis, and its method of use was separately discussed in particular neuroses, character analyses, and at the end of the psycho-analytic cures. In conclusion attention was drawn to the difference between this activity and the therapeutic measures of others (Jung, Adler, Bjerre), and an attempt was made to construct the theoretical bases of this technique.

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EUGENIA SOKOLNICKA, Warsaw. On the Diagnosis and Symptomatology of the Psycho-Analytical Theory of the Neuroses.

Comparison between the pre-analytic and analytic diagnosis and symptomatology. A case was discussed which appeared particularly to justify such a comparison. The significance of the correct diagnosis for the therapy of the functional neuroses.

A brief survey of the method of how the diagnosis and symptomatology was carried out before psycho-analysis. As an example: Hysteria and the so-called neurasthenia. The earlier theories of the neuroses. Uniformity of the remedies applied. Criticism of the



concepts on which the earlier functional theory of the neuroses was founded. Want of precise psychological concepts.

Freud's theories of instinct. Creation of a new psychology that does not rest on the artificial analyses of the laboratory, but investigates the elementary phenomena of the mind in its work in reality. Creation of newer concepts on which can be founded the new diagnosis and symptomatology. Transferring of the main importance to the investigation of the ontogenesis instead of as previously phylogenesis (heredity). Creation of objective psychological methods of investigation for the functional neuroses in place of the earlier apparently exact physical ones. Therefore for the petty description of separate symptoms is substituted an extremely fine shading of diagnosis and symptomatology, which enables one to see into the structure of the patient's mind.

Three examples that show the difficulties of an immediately correct and complete diagnosis in many cases, and at the same time the solution of these difficulties by means of psycho-analysis. Borderline cases with symptoms not quite defined in the earlier sense, are made clear and also capable of cure by psycho-analysis. Example. An analysis is from beginning to end the progressive uncovering and interpretation of symptoms. Examples. The new conception of the word "symptom". Character as a symptom. An example that can serve as a contribution to the question of the rôle of the ego impulses in the formation of symptoms.

General conclusions from the material. Theoretical and practical value of the new views arrived at through analysis concerning symptomatology and diagnosis.

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DR. GEORG GRODDECK, Baden-Baden. On the Psycho-Analytic Treatment of Organic Illnesses.

The lecturer sought to prove that factors of censorship exist which permit organic troubles to develop in order to keep repressed material from consciousness. One invites healthy or sick people to look at the objects on their writing table, to close their eyes and then to name the objects; this or that object will be omitted, and also things that are associated with something repressed. If the repressed material is too powerful then the censorship is increased rendering the person short-sighted and eventually limits the possi-



bility of seeing through congestion of the blood vessels of the eyes. The process is the same in the visceral sphere as the formation of antitoxine by the organism through intoxication or of fever and suppuration through infection.

If the repressed material is produced or its affective content set free, then the congestion is unnecessary and can be given up. They can; they need not. The same thing is valid for all spheres of life of the organism. Examples were quoted.

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DR. L. BINSWANGER, Kreuzlingen. Psycho-Analysis and Clinical Psychiatry.

An attempt to compare the two directions of investigation with each other in their fundamental concepts. This is done at first by means of the individual disease concepts of psychiatry with more especial consideration of the most recent views in the sphere of characterology (Kretschmer), and that by means of the three conceptual layers which form the system of psycho-analysis, namely, the pure psychological investigation or that of the personality, the dynamic-qualitative, and the biological-teleological methods of consideration. The differences were then examined that exist between psycho-analysis and psychiatry with respect to the concept of disease and health, the concept of cure and diagnosis. In conclusion the psycho-analytical direction of investigation as a system moulding mental and psychical phenomena into a unitary entity from the point of view of performance was contrasted with psychiatry as a conglomerate connected together only by its practical tasks.

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DR. A. STÄRCKE, Den Dolder, Holland. The Relations between Neuroses and Psychoses.

Both categories have their root in the relative damming up of the libido, infantile fixations, and ambivalency, as Freud has shown in the case of the neuroses. The difference between the two groups is a quantitative one. The boundary is dependent on the stage of development or regression of the social civilisation.



The criterion of the lay conception of mental disease lies in the over-development of behaviour (including speech) on the part of those who are mentally ill, which destroys the normal repression. In both groups the regression of the libido and ego impulses can extend to the lowest stages. The regression in the neuroses concerns in general small quantities. The reconstruction in the neuroses is a compromise; its result in the psychoses stands in general on a lower level both for the libido and ego impulses.

The obsessional neurosis takes a medial-position between psychosis and neurosis. The regression of the ego impulses proceeds parallel to that of the libido. It is not the narcissistic regression in itself that determines the constitutional disposition in the psychoses, but the fixation of the lower level. This fixation often goes together with some libidinous gratification of the lower level.

The differences between the symptoms are conditioned, apart from the depth of regression, also by the distribution of the libido over parts of the body. The psychotic breaking through of the censorship is conditioned by abnormally strong pleasure in thinking. Organic increase of libido plays a greater part in the psychoses. Organic impoverishment of the libido is responsible for the schizophrenic pseudo-dementia. The four Freudian types of neurotic sickness occur also in the psychoses. In addition psychoses often follow infantile wish-fulfilments (for example, death of a relative, perverse practice rendered possible).

A guiding influence in the reconstruction of society belongs to Freudianism.

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O. PFISTER, Zürich. The Significance of Psycho-Analysis for Constitutional Law and Political Economy.

The lecturer showed how the prevailing folk psychology, since it recognises totemism as the point of departure of the formation of the state, was forced to face a riddle that was insoluble by its means, while Freud through his studies on living people was able to make intelligible from a unitary point of view the different characteristics of totemism, namely, the ambivalent treatment of the totem as an object of anxiety and as a protecting spirit, the prohibition of killing, the sacramental meal, and the connection with exogamy. The choice of plants as totem was illustrated by



aversions to the use of vegetable foods, by means of a phobia against plucking flowers, and by the drawings of a boy fourteen years old who expressed unconsciously his sexual wishes in drawings of plants.

Unconscious roots of the different constitutions of a state were shown in the day-dreams of two brothers, of whom one resembled his father and was a monarchist, while the other took after his mother and preferred republicanism. The father complexes of Bismarck and Bebel expressed themselves in monarchism and state socialism, and also the anarchist remains attached to the father. The Irishman often hates in England the father, as he loves in Ireland the mother. In a patient of Ernst Schneider the separation of church and state became the centre of his interest as soon as the divorce of his parents became acute.

The importance of psychology of the unconscious for the normal life of the state, for war and revolution, was only touched upon.

In the second part the life of society was referred to and especially the psychology of capitalism. Max Weber finds the sources of capitalism chiefly explained in the doctrinal thought of Calvin, but did not explain how this theory could be maintained in contradiction to the New Testament and its prohibition of riches, and how also Calvin's demand to place gold in the service of God was abandoned. From the analyses of living people it is proved that the spirit of capitalism everywhere, and also in Calvinism, presupposes repression of love. Thereby may be discovered analytically in pathological capitalistic predispositions the *Œdipus* attitude against the father, narcissism, anal-erotism, castration reactions or sadistic masochistic impulses. The results as regards religion, ethics and society correspond with the processes in the obsessional neuroses. Capitalism without religion, frequently to be understood as desublimation, bears in itself the germ of the struggle of all against all, as does political imperialism.

Thus in consequence of the despising of the law of love, the tragedy of Peer Gynt is repeated in the life of society, and the curse of the Nibelung is fulfilled.

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DR. SABINA SPIELREIN, Lausanne. On the Question of the Origin and Development of Speech.



Autistic speech which is not intended for communication and understanding of other people is distinguished from "social speaking". Autistic speech is the primary one. Spielrein considers that singing and words, *i. e.* speaking aloud, essentially belong to social speech. Likewise there are the "social" or "sociable" arts, such as music and poetry, which explains their high popularity. Theories of the origin of speech were analysed. The question was especially considered whether the child itself invents language and to what are traced back the childish "alteration of words". The mechanisms that are supposed to be the origin of the first words, Mama and Papa, were investigated and supported by observations of others; the lecturer traced them back to the act of sucking. These words are the bearers of pleasure which the child experiences in the act of sucking, and to them may be attributed the enormous significance of the first wish-fulfilment in phantasy, because here the wish, directed on to an external object, cannot be gratified whenever desired. In consequence of the pleasurable sensation communicated at first in the act of sucking by means of another living being, the child perceives the idea of an external and pleasure-bringing object, for which one longs and which can be fetched by the calling out of the wish word derived from the act of sucking. In this way originated the first forms of social speech, which at the same time are signs of communication between the ego and the external world, therefore signs of expression of the germinating hetero-erotism.

The relations between word-formation and memory of the childish feelings were discussed and examples given showing that the childish formation of words and sentences or an alteration of both could be explained, amongst other ways, from the adaption to the new psychological phase of development, assimilation to the old and decay corresponding with subconscious elaboration.

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DR. MARGARETE STEGMANN, Dresden. Form and Content in Psycho-Analysis.

Content is the complex, the substance of the occurrence, the "What" of the neurosis. Under form is to be understood the nature, the "How" of the occurrence, the mental structure that is expressed in it.



The contents are not only the same in all neuroses, they can be constantly demonstrated in the healthy. The form is typically different and within the bounds of certain types individually distinct, so that in spite of the similarity of the contents each case for analysis is something new and peculiar to itself.

Besides the content it is also important to pay full attention to the form and the principle of mental activity in the patient. Freud, who is not only the father but also the classic of analysis, has dealt in a masterly manner with these two aspects of the subject of the analysis. Though observation of the contents, the grouping of complexes, is important and necessary for scientific investigation, for the further extension of the system of Freud's theories the lecturer has found very fruitful for therapeutic practice a closer consideration of the individual law of form. A few examples from analyses were quoted.

The uncovering of the contents by means of the bringing up of complexes from the unconscious, from the spheres of feeling and of the irrational, aims at making them accessible to the influence of reason and conviction. What effects this is consciousness.

The recognising and making conscious of the law of form raises the forces (impulses) from the lower stage of their objectivation to the higher one of conscious formation. The analysis has to deliver the patient from the material state of bondage to a spiritual state in which the contents, the material, is not denied and forced (suppressed), but was further in organisation.

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DR. HERMINE HUG-HELLMUTH, Vienna. On the technique of the analysis of children.

The peculiarity of the childish mind and its relation to the environment needs a special technique of analysis. Such an analysis can only be carried out in children over six to seven years of age; in younger ones only a psycho-analytical education can take place.

It is advisable to treat children in their home and accustomed surroundings, and not to have them lying down, as this position is connected by the child with phantasies of being overpowered or seduced.



From seven to eight years of age play has often to form the bridge for treatment; in older children it is useful to tell of the tricks of other children as a good introduction to analysis. Since the analyst is oriented by the parents concerning the "naughtiness" of the child one need not be afraid of "corrupting" the patient through such communications.

Positive transference is brought about as a rule in the very first hours, and is immediately played off against the parents; hence it is necessary to explain to the parents the significance of the transference, so that the parental love does not suffer too much from the apparent turning away of their child. The negative transference is clothed in the form of constant fear of betrayal by the analyst to the parents. The discussion of sexual questions requires special tact; here besides a strong and trustful attachment of the child there frequently appear tendencies arising out of an over-great repression, namely, the impulse to humiliate the analyst.

Great use can be made of free associations in youthful patients; dreams also furnish valuable material from the unconscious. The analysis of children leads to the knowledge that in the child there exists another layer in the unconscious, another distribution of the systems conscious and pre-conscious, than in adults.

The relation of the analyst to the parents is a difficult chapter in the analysis of youthful patients. His chief task towards them is to keep them from actively participating in the treatment, and to get them to recognise that their only cooperation lies in patience and toleration. The parents have to recognise that they ought to demand of their mentally sick child just as little as regards learning as in a child suffering physically.

I have not yet seen an analysis of children fail on account of the resistance of the young patient, but more than one on account of the resistance of the parents.

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#### THE BRITISH PSYCHO-ANALYTICAL SOCIETY.

There have been nine Meetings of the British Psycho-Analytical Society since the last report.

The Meetings held on May 13th., June 10th., July 8th., and July 19th. were devoted to an exposition by Mr. J. C. Flügel of



Freud's articles in the "Sammlung kleiner Schriften zur Neurosenlehre", fourth volume, on "Triebe und Tribschicksale", "Die Verdrängung", and "Das Unbewußte".

On May 27th. a Special Meeting of Members was convened to consider and adopt the revised rules of the Society.

The General Annual Meeting of the Society was held on October 11th., Dr. Ernest Jones was re-elected President, Dr. Douglas Bryan Honorary Secretary, and Dr. W. H. B. Stoddart Honorary Treasurer. All the Associate Members were re-elected, and Dr. Estelle Maude Cole was elected a Member. The Secretary reported that one Member, Col. Sutherland, I. M. S. had died, and that one Member, Dr. Devine, and two Associate Members, Dr. Lavers and Mr. Ballard, had resigned. Fifteen Members and Associate Members attended the Congress at The Hague.

Seven new Associate Members have been elected:

Dr. O. H. Bowen, Gwynant, Peaks Hill, Purley.

Dr. Chuckerbutty, c/o Grindley's, Calcutta, India.

Dr. M. Culpin, Slydersgate, Loughton, Essex.

Dr. J. Rickman, 18 A, Elsham Road, Kensington, W. 14.

Dr. T. Waddelow Smith, City Asylum, Nottingham.

Dr. Snowden, 21, New Cavendish Street, W. 1.

Dr. C. R. A. Thacker, Sidney Sussex College, Cambridge.

Affiliation of the Society to the International Psycho-Analytical Association was confirmed at the Congress.

At a Meeting held on October 15th. Mrs. Riviere gave the chief points from Prof. Freud's address to the Congress, and a discussion followed.

At a Meeting held on November 11th. a discussion took place on War or Battle Dreams, with special reference to the content of the dream in as far as it was an exact replica of an actual experience, and also its relation to the pathogenic trauma.

*Dr. Wright* said that in the cases he had examined soon after return from the front the war dreams were frequently repetitions of pure experiences, but after a short while these soon had in-different matter added.

*Dr. Culpin* thought that only a very small percentage were pure battle dreams, and even these might not have been pure if they had been more carefully investigated.

*Dr. Brend* said that he had noted very few pure battle dreams.



*Dr. Riggall* had noted only one case of a pure battle dream and he was even inclined to doubt this.

*Dr. Devine* (a visitor) could only recall one case of a pure battle dream.

*Dr. Davison* quoted a case of a pure battle dream which was associated with a very similar occurrence that the patient experienced at seven years of age.

*Dr. Bowen* considered there was only a very small percentage of pure battle dreams.

*Dr. Bryan* said that he had not met a case of a pure battle dream, but the cases he had examined had been some time in hospital and away from the front. An occasional auditory dream of bursting shells appeared to be a pure battle dream. He considered that very few so-called battle dreams referred to the pathogenic trauma.

*Dr. Eder* (a visitor) could give no instance of a pure battle dream even in cases seen soon after the trauma, and only a very small percentage of the dreams referred to the pathogenic trauma.

*Dr. Fitzgerald* (a visitor) considered that about 15 per cent of battle dreams were pure representations, but they did not necessarily refer to the pathogenic trauma.

*Dr. Harper* (a visitor) considered that the pure battle dream was rare. He mentioned the case of a man who dreamed a battle dream which he did not immediately recollect as such until he had definitely thought about it.

*Dr. Ernest Jones* summed up the discussion, and said it was not yet proved that unaltered reality dreams occurred. He expounded Freud's views on the primitiveness of the tendency to live traumatic experiences over again as developed in "Jenseits des Lustprinzips".

At a Meeting held on December 9th. Dr. R. M. Riggall read a paper on "Some Recent Cases of Impotence".

Author's Abstract :

Cases requiring a lengthy analysis contrasted with those clearing up with extreme ease. Impotence a very common symptom in the war neuroses. Cases of Ejaculatio Praecox illustrating Abraham's conclusions. Comments on the general impotence of every day life with some original views on the effect of the female on the male.

The reading of the paper was followed by a discussion.

DOUGLAS BRYAN Hon. Secretary.

\*



## SWISS PSYCHO-ANALYTICAL SOCIETY

On February 10th. 1919 a circular letter was sent to a number of persons by the Rev. Dr. Oskar Pfister, Mrs. Mira Oberholzer, M.D., and Dr. Emil Oberholzer in Zürich, inviting them to a meeting in Zürich on February 21st. The object of this meeting was the foundation of a Swiss Psycho-Analytical Society embracing all those adherents of Psycho-Analysis who had not accepted the theories of Adler and Jung. The Swiss Psycho-Analytical Society was then to apply to the International Psycho-Analytical Association for affiliation. Its meetings were to be held not only in Zürich but from time to time in some centrally situated place which would make it easy for all members to attend.

Of the fifty persons invited twenty-one (among these twelve medical men, three of them psychiatrists in public asylums) promised to be present at the meeting or to join as members after the forming of the Society. A number of others hesitated to declare their membership though they regarded the project favourably; some of these asked to be received as guests of the Society. Three of the members were from French Switzerland.

*Inaugural meeting on March 21st. 1919.*

In the course of the discussion on the rules of the society it was resolved that each member be obliged to adhere strictly to the state medical regulations concerning the treatment of patients by non-medical men. In view of "wild analysis" it was resolved that those analysts who are not medical men should work in co-operation with a doctor to avoid diagnostic errors.

In the discussion about the terms of admission it was resolved to draw up the rules free from all sense of illiberality and intolerance but to exclude all those applying for membership whose personality would render a misuse of the psycho-analytic technique not improbable. The officers of the Society were then duly elected. Practical reasons made it necessary for the President Dr. Emil Oberholzer, living in Zürich, to accept at the same time the offices of Treasurer, Secretary and Librarian.

It was decided to hold the meetings only once in a month.

*1st. meeting, March 24th. 1919.*

Dr. H. Sachs, Dr. O. Rank and Dr. Ernest Jones, as guests: "Psycho-Analysis as an Intellectual Movement". After the reading of the papers which gave a survey of the psycho-analytical move-



ment it was formally and unanimously resolved to apply to the International Psycho-Analytical Association for affiliation. The rules of the Society were finally drawn up. It was resolved to admit guests as liberally as possible, especially to papers of universal interest. It was resolved that the subscription for the year should be 10 francs to furnish the means for the library.

#### RULES OF THE SWISS SOCIETY FOR PSYCHO-ANALYSIS.

##### 1

The Swiss Society for Psycho-Analysis, which shall constitute an autonomous National Branch Society of the International Psycho-Analytical Association, shall have as its object the theoretical and practical exercise and encouragement of the psycho-analytic method founded by Freud.

##### 2

This object shall be attained:

(1) By means of scientific discussions, so far as possible with the participation of all the Members;

(2) By the foundation of a library, by the circulation of periodicals, and by the opportunity for a written interchange of views;

(3) By giving information to non-Members on matters connected with psycho-analysis.

##### 3

Any person desiring to be elected to the Society must be proposed by two Members, who must communicate directly with the President. The latter shall lay the application for Membership, which must be made in writing, before the Executive Committee, and shall communicate the result of their deliberations to the next Ordinary Meeting. The election shall take place at the next subsequent Meeting, voting being by ballot; a two-thirds majority shall be required, and all non-resident Members shall receive notice and have an opportunity of recording their opinions. The result shall not be communicated to the candidate until after the Meeting, and in the event of a postponement or rejection of his candidature no grounds shall be stated.

The Members of the Society shall be pledged to a strict observance of the laws governing the practice of medicine in the locality in which they reside.



Guests shall be admitted to Meetings only if notice has previously been given by a Member to the President and his consent obtained. Guests may be excluded from lectures and discussions which are not suitable for a wider audience.

## 4

Members may attend and vote at all Meetings, and shall have the right of electing and of being elected.

The amount of the Annual Subscription shall be determined each year at the General Meeting in accordance with the actual requirements.

Members shall have the right of attendance at the Meetings of all Branch Societies. They shall be entitled to receive regularly the organ of the Society, and to be invited to the Congress of the International Psycho-Analytical Association. At the Congress they shall have the power of electing and of being elected.

## 5

Membership shall cease:

- (1) On voluntary resignation, which must be notified in writing to the Executive Committee;
- (2) If a Member fails to fulfil his obligations;
- (3) In case of a gross injury to the interests of the Society, on the proposal of the Executive Committee, by the resolution of a three-quarters' majority of the Members present at an Ordinary Meeting.

## 6

The functions of the Society shall be carried out by:

- (1) The Ordinary Meeting;
- (2) The Executive Committee, consisting of the President, the Vice-President, and three other Members (one of the Members of the Committee discharging the offices of Secretary and Treasurer).

The Executive Committee shall be elected by ballot for a period of one year by an absolute majority of the Ordinary Meeting. Every Member of the Executive Committee may be re-elected to the same Office for a period not exceeding three years in all. The Executive Committee shall represent the Society in all external relations, and shall be entrusted with the conduct of its affairs. It shall present an Annual Report to the General Meeting.



The first Officers of the Society shall be nominated by the Constituent Meeting after the Rules have been approved.

## 7

The dissolution of the Society shall only be effected by the General Meeting with an attendance of at least two thirds of the total number of Members and by a three-quarters' majority. The Meeting which resolves upon the dissolution shall also determine the disposal of the Society's property. Should there be no quorum, the decision shall be made at a second Meeting by an absolute majority of those present.

Zurich, March 24th. 1919.

*2nd meeting*, May 16th. 1919.

Dr. O. Pfister: The biological and psychological foundations of Expressionism.

*3rd. meeting*, June 20th. 1919.

Dr. A. Kielholz: Jakob Böhme, a pathographical contribution to the psychology of mysticism. (An essay on this theme appeared as No. 17. of the *Schriften zur Angewandten Seelenkunde*).

*4th. meeting*, July 11th. 1919.

Dr. H. Rorschach: Studies of Sectarians. Part. 1: "Johannes Binggeli, the founder of the Sylvestrian brotherhood in Schwarzenburg".

*5th. Meeting*, September 19th. 1919.

Dr. H. Rorschach: Studies of sectarians Part. 2: Anton Unter-nährer, the founder of the sect of the Antonians.

Dr. R. de Saussure: Les Antoniensi à Genève.

Dr. E. Oberholzer: Presentation of a case of Glossolalia.

*6th. meeting*, November 7th. 1919.

Dr. F. Morel: "À propos de quelques manifestations infantiles de l'introversion chez les mystiques".

#### List of Members, December, 1920.

1. Prof. Dr. phil. P. Bovet, Geneva, Dir. de l'institut J. J. Rousseau, Taconnerie 5.
2. Priv.-Dozent Dr. phil. F. Morel, Geneva, 57 Route de Chêne.
3. Dr. med. R. de Saussure, Geneva, Tertasse 2.
4. G. de Gontaut-Biron, Warsaw, Aleja Ujazdowska 19.
5. Dr. med. Hans Jakob Schmid, Leysin, Vaudois.



6. Dr. phil. E. Schneider, Bern, Erlachstraße 5.
7. Dr. jur. Paul Dubi, Redakteur, Basel, Mittlere Straße 127.
8. Emil Lüthy, Basel, Neubadstraße 49.
9. Dr. med. A. Kielholz, II. Arzt, Königsfelden, Kantonale Irrenanstalt.
10. Frl. Dr. med. S. Kempner, Ass.-Arzt, Rheinau, Kantonale Irrenanstalt.
11. Dr. med. Philipp Sarasin, Oberarzt, Rheinau, Kantonale Irrenanstalt.
12. Dr. med. L. Binswanger, Kreuzlingen, Sanatorium Belle-Vue.
13. Dr. med. H. Rorschach, II. Arzt, Herisau, Kantonale Irrenanstalt.
14. Dr. med. F. Kornmann, Dir. Arzt, Lugano, Kurhaus Monte Bré.
15. Dr. med. Dorian Feigenbaum, Jerusalem.
16. Dr. med. Max Geiser, Dir. Arzt, Unter-Aegeri, Sanatorium Adelheid.
17. Albert Furrer, Bezirkssekretär pro Juventute, Zurich, Südstraße 78.
18. Frl. Dr. med. Emma Fürst, Zurich, Apollostraße 21.
19. Dr. phil. Ulrich Grüninger, Zurich, Städtisches Knabenheim, Amtsvormundschaft, Selnau 9.
20. Walter Hofmann, Lehrer, Zurich, Russenweg 9.
21. Dr. phil. et cand. med. M. Nachmansohn, Zurich, Herbartstraße 1.
22. Ernst Neuenhofer, Zurich, Bellerivestraße 20.
23. Frau Dr. med. Mira Oberholzer, Zurich, Rämistraße 39.
24. Dr. med. Emil Oberholzer, Zurich, Rämistraße 39.
25. Dr. theol. Oskar Pfister, Pfarrer, Zurich, Schienhutgasse 6.
26. Dr. med. Gust. Ad. Wehrli, Zurich, Leonhardstraße 1.
27. Frl. med. pract. H. Etter, Zurich.
28. Dr. phil. W. Mackenzie, Genoa.
29. Med. pract. Hans Behn-Eschenburg, Herisan, Kantonale Irrenanstalt.
30. Albert Peter, Lehrer, Zurich.
31. Dr. phil. Jean Piaget, Neuchâtel.
32. Hermann Tobler, Leiter des Landeserziehungsheimes Hof-Oberkirch.

## Executive Committee

President: E. Oberholzer.

Vice-President: H. Rorschach.

Ph. Sarasin.

F. Morel.

O. Pfister.

\*



## HUNGARIAN PSYCHO-ANALYTICAL SOCIETY (FREUD SOCIETY)

Report of the Society from Jan. 1st. to Dec. 31st., 1920.

## Scientific meetings:

- Jan. 4. Dr. B. v. Felszeghy: Janus.
- Jan. 18. Dr. I. Hollós: Relations to Psycho-Analysis in the Psychiatry before Freud.
- Feb. 1. Case Reports.
- Feb. 15. Dr. G. Róheim: On Totemism in Australia.
- Feb. 29. Dr. G. Róheim: Second Part of his Paper.
- March 4. Eugenia Sokolnicka: On the Analysis of an Infantile Obsessional Neurosis.
- March 28. Dr. S. Ferenczi: On Active Therapy.
- April 11. Discussion of Dr. Ferenczi's Paper.
- April 18. A. Kolnai: Psycho-Analysis and Sociology.
- April 25. Discussion of Dr. Ferenczi's Paper continued.
- May 9. Dr. S. Feldmann: Analysis of Blushing.
- May 30. Dr. J. Eisler: An Unconscious Phantasy of Pregnancy in a Man in the Guise of a Traumatic Hysteria.
- Sept. 26. Dr. S. Ferenczi: Report of the VIth. International Psycho-Analytical Congress at the Hague.
- Oct. 10. Dr. S. Ferenczi: Psycho-Analytical Observations on Tic.
- Oct. 24. Dr. J. Eisler: Desire for and Disturbed Capacity for Sleep.
- Nov. 7. Dr. S. Feldmann: On Traumatic Psychoses.
- Nov. 21. Eugenia Sokolnicka: Selma Lagerlöf's Herrenhof Myth
- Dec. 5. M. Klein: Contribution to Analysis in Early Childhood.
- Dec. 19. Dr. Hermann: On the Psychological Conditions of Psycho-Analysis.

## Business meeting:

- Feb. 1st. (Annual Meeting) The annual Report was read and accepted, the Officers re-elected, and the annual subscription raised to 220 crowns.
- April 18. A. Kolnai (Budapest VI. Aréna utca 32a) was elected to membership.

Note: At the end of the year Dr. J. Hárník leaves our Society and enters the Berlin Society.

DR. RADÓ, SECRETARY



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